PRACTICAL OBSERVATIONS

ON

VENEREAL COMPLAINTS.

By *F. SWEDIAUR*, M.D.

THE SECOND EDITION, CORRECTED.

——Scientiæ veros fines cogitent; nec eam aut animi causa petant, aut ad contentionem, aut ut alios despiciant, aut ad commodum, aut ad famam, aut ad potentiam, aut hujusmodi inferiora; sed ad meritum, et usus vitæ, eamque in charitate perficiant, et regant.

Baco de Verul. Pref. ad nov. organ.

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ADVERTISEMENT.

THE author of the following ſmall Treatiſe has made it his buſineſs to examine all that has been written on the Venereal Diſeaſe, from the days of Aſtruc to the preſent time; to all that he has thus ſelected, he has added his own Practical Obſervations, and hopes, that by thoſe who are beſt acquainted with the following Treatiſe will not be deemed ſuperfluous.

SHOULD any reader be ſtartled at certain modes of practice here recommended, he begs the favour, before they venture to condemn, that they will take the trouble to give them a fair trial; and if they then diſcover them to be erroneous, that they will give a candid account of their experience to the world as he has done, without laying any ſtreſs upon theories unſupported by facts, or plauſible conjectures which have not been confirmed by repeated experimental obſervations. Whoever makes any diſcovery that can tend to alleviate in any degree the diſtreſſes of mankind, is called upon by the duties he owes to ſociety to make theſe diſcoveries as generally known as poſſible. This has been the author's way of thinking at all times, and that which has directed his conduct on the preſent occaſion.

HE has omitted in the former edition to mention, among the different methods of curing the lues, Mr Clare's manner of rubbing one or two grains of calomel, with ſaliva, every morning and evening, on the lips or outſide of the gums. The objections he had

againſt

againſt this method ſubſiſt ſtill, and are acknowledged by the author himſelf, viz. a very ſpeedy ſoreneſs of the mouth and ſalivation. Theſe ſymptoms he found always rather contrary to a happy and radical cure. This application to the mouth, or glans penis, or labia, however, may be uſeful to perſons who, from a peculiar irritability, cannot uſe mercury in any other way.

ANOTHER obſervation is about the uſe of opium againſt venereal ulcers. This remedy has been lately highly extolled, but upon diligent and careful inquiry, he has not found one patient, with venereal ulcers, cured by it, who had not previouſly made uſe of mercury, or who was not obliged to have recourſe to this latter to complete the cure afterwards. Opium, however, ſeems to be a valuable medicine for allaying the pain, and favouring the healing of ulcers of various kinds.

AN error muſt likewiſe here be taken notice of, the word CLAP is not, as mentioned, derived from *claping*; but from the obſolete French word *clapier*, ſignifying a lodging or ſhop of a ſingle common woman.

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PRAC-

PRACTICAL OBSERVATIONS ON VENEREAL COMPLAINTS.

Ad recte medendum omnino opus est, ut remedia, non solum generi, sed specici cuique, et sæpe etiam varietatibus quibusdam, apprimè sint accommodata.

CULLEN, *Synop. Nos. Method.*

CHAP. I.

Observations on the Venereal Infection, and the different appearances of Syphilitic Complaints in general.

WE say that a person is poxed, injured, or infected with the venereal disease, pox or bad distemper*, when the venereal poison has been received into the system, and there produces its peculiar effects. These effects or symptoms are ulcers of the mouth, fauces, and skin, cutaneous eruptions, tetters, pains and swelling of the bones, &c. But as long as the effects

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* In latin this disease is called, *lues venerea*, *morbus gallicus*, or *Syphilis*. Whether the name *Syphilis* is derived from συς, *porcus*, and φιλια, *amor*, as if you would say, *amor porcinus*; or whether it owes its origin to some other derivation, is uncertain. In French it is called *La maladie venerienne*, *La verole*, or *Grande verole*; in German, *Lustseuche Franzosen*.

of the poiſon are confined to the genitals, the diſorder is not called a ſyphilis, lues venerea, or pox; but diſtinguiſhed by ſome particular name, according to its different appearances; ſuch as gonorrhœa, ſhancre, bubo, &c.

Concerning the nature of the venereal poiſon, we know no more than we do about that of the ſmall pox, or any other contagion; we know only that it produces ſuch and ſuch effects, which yield to a particular mode of treatment. Like other contagions, it requires ſome time after being applied to the human body, before it produces that *fermentation* (if I may be allowed the expreſſion) which brings on the diſorder. It is not known whether the poiſon has different degrees of acrimony and volatility, or whether it is always the ſame in its nature, varying only with regard to the particular part to which it is applied, or according to the different habit and conſtitution, or particular *idioſyncraſy*, of the perſon who receives the infection. We know that mercury poſſeſſes a certain and ſpecific power of deſtroying the venereal virus: but we are quite uncertain, whether it acts by its ſedative, aſtringent, or evacuant quality; or if not rather by a chemical elective attraction, whereby both ſubſtances uniting with one another, are changed into a third, which is no more hurtful. but has ſome new properties, entirely diſtinct from thoſe of the two former.

The variolous contagion, we know, produces its effects in about twenty or twenty-four days, after the infection is received from the atmoſphere, and eight or ten days if by inoculation. But with regard

regard to the venereal virus, we are leſs acquainted with the period. At ſome times, and perhaps in particular perſons, it requires a longer time to produce its effects, than at other times, or in other perſons. I have ſeen ſhancres ariſe in the ſpace of twelve hours, nay in a ſtill ſhorter time, indeed I might ſay in a few minutes, after impure coition; whereas in others they make their appearance only in as many days. The generality of men feel the firſt ſymptoms of a gonorrhœa on the ſecond, third, or fifth day after an impure coitus; but there are caſes where they are not obſerved till after as many weeks or months. About ten years ago, I was conſulted by a perſon in whom a violent diſcharge from the glans, along with a phymoſis, but without any ſhancres, took place four weeks after infection; though, during all that interval, he felt not the leaſt ſymptom of the diſeaſe. Some years ago a young man went out in ſeemingly perfect health to the Eaſt Indies; but on his arrival in that hot climate, after a voyage of four months, a violent gonorrhœa broke out before he went on ſhore, though he could have received no infection during the voyage, as there was not a woman on board.

How long the venereal poiſon may lurk in the body itſelf, after it has been abſorbed into the maſs of blood, before it produces any ſenſible effects, is a matter of equal uncertainty. There is ſcare a practitioner who has not obſerved inſtances of its remaining harmleſs for weeks, or even months, in the body. I have had acceſs to obſerve a caſe, where, after lying dormant for half a year, it

broke out with unequivocal ſymptoms. But the following inſtance is ſtill more extraordinary. Some years ago I was conſulted by a gentleman about a ſore throat, which I declared to be venereal. My patient was aſtoniſhed, and aſſured me, that for nine years paſt he had not had the leaſt venereal complaint, nor had any reaſon to believe he had ſince received any infection. But at that time he had been in the Eaſt Indies, where he laboured under a virulent gonorrhæa. On his return to Europe, being to appearance in perfect health, he married, and continued perfectly free of any ſuch complaint ever ſince. By a mercurial courſe, however, the complaint for which he applied to me was completely removed.

In ſome perſons the venereal poiſon more particularly attacks the throat, where it produces ulcerations; while in others it exerts its virulence on the ſkin or bones. Whilſt the greateſt part of mankind are thus eaſily affected by this poiſon, there are ſome few who ſeem to be altogether unſuſceptible of the contagion, and run every riſk without ſuffering in the ſmalleſt degree; juſt as ſome cannot be infected with the variolous contagion, though they go into infected places, and expoſe themſelves to every hazard by which the diſeaſe is generally communicated. Some are more liable to be infected than others ſeemingly of the ſame habit; and thoſe who have been once infected ſeem to be more liable to catch the contagion a ſecond time, than thoſe who never were infected before with the diſeaſe. The ſame difference is obſervable in the progreſs made by the diſeaſe after

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the patient is infected. In ſome the progreſs is ſlow, and the diſeaſe appears ſcarce to gain any ground; while in others it advances with the utmoſt rapidity, and ſoon produces the moſt terrible ſymptoms.

At what time this dreadful malady, *the very idea of which poiſons the ſource of happineſs*, was firſt known among mankind, is a matter I cannot pretend to decide. Even the time of its firſt appearance in Europe, and whence it was imported thither, is uncertain. Thus much we may venture to affirm, that we have no authentic proofs of its having exiſted among the ancient Greeks and Romans; though theſe undoubtedly were as licentious as their poſterity, whether barbarous or refined. Some diſorders are mentioned by ancient writers which ſeem to intimate the exiſtence of the venereal diſtemper, in ſome ſhape or other, from the earlieſt antiquity. Such are the *diſcharge* mentioned in the book of Leviticus, the diſeaſe of Job, and that related in the Pſalms of David; ſome complaints of the genital parts related by *Paulus Aegineta*, by *Aetuis*, &c. The *corroding ulcers of the prepuce and glans*, the *diſcharge of thin ſanious matter from the penis*, the *mortification and cancer of the penis*, the *phagedænic ulcer of the ſame*, the *warts of the prepuce and glands, condylomata ad anum*, the *ſwelled teſticles ariſing without external contuſion*, all mentioned by *Celſus*, *l. vi. cap. xviii. De obſcœnarum partium vitiis*, and deſcribed as obſtinate diſeaſes, and hardly curable without the hot iron. But whether theſe have been modifications of our more modern ſyphilitic complaints, or diſorders of a quite different

nature, is what I cannot take upon me to determine.

That venereal complaints, however, did really exiſt in Europe before the return of Columbus from his firſt voyage to the Caribbee iſlands in 1493, is not only probable, for the reaſons alleged by Dr *Sanchez*, in his *Diſſertation ſur l'origine de la maladie venerienne*, and in his *Examen hiſtorique ſur l'apparition de la maladie venerienne en Europe;* but confirmed to me, though contrary to the opinion of Dr Aſtruc, by the 4th law given in the manuſcript ſtatutes, *De diſciplina Lupanaris publici Avenionenſis* (Avignon), made in the year 1347, by Queen *Joanna* I. After other regulations, the law proceeds thus: "Jubet Regina "Sabbato quilibet a Bayliva una cum chirurgo a "conſulibus propoſito, mulieres meritorias ſingu- "las luſtrari; quotcunque in lupanari proſtant. "Et ſi qua ſcortatione ægritudinem ullam con- "traxerit, a cæteris ſeponi ut ſeorſim habitet, ne "ſui copiam facere poſſit; ut morbi præcaveantur "qui a juvenibus poſſent concipi." Which may be thus tranſlated: "The Queen further orders, that "every one of the women kept in that bawdy-houſe "ſhould be viſited every Saturday by the mother "abbeſs, together with a ſurgeon appointed by the "magiſtrates for this purpoſe; and if there be any "who have contracted ſome diſeaſe by *ſcortation*, "the ſame ſhould be ſeparated from the reſt, and "be ſhut up in a private room, ſo that ſhe may not "lie with any man, in order to avoid by theſe means "the diſorders which might be communicated by "her to young men." See *Aſtruc De morb. vener.* P. 34.

p. 34. But all this will be made very ſoon ſtill more probable from the light thrown on the ſubject by the learned and ingenious Dr *Henſler*, from old authentic manuſcripts diſcovered by him.

It is a queſtion, whether the venereal poiſon can be abſorbed into the ſyſtem, without a previous affection of the genitals or ſome other parts of the ſurface of the body; and indeed this is with me ſtill a matter of doubt. Though I have for fifteen years examined all the caſes which fell under my inſpection, with a view to determine this queſtion, I have not met with one well-authenticated fact which could determine me to take the affirmative. I have never ſeen a ſingle perſon affected with this diſeaſe for the *firſt* time, without ſome previous appearance, either of a running, or a venereal ulcer, in ſome part or other of the body, eſpecially of the genitals; though indeed I have met with ſeveral inſtances where the patient had imagined himſelf radically cured of ſuch complaints long before. In ſome caſes, I have. on a cloſe examination, diſcovered very ſmall venereal ulcers, where the patient himſelf knew nothing of them; in others, where the patients have aſſerted, that they were infected without any previous diſeaſe of the ſurface, they have, on a ſtrict inquiry, confeſſed that they had either had ſhancres, or ulcers of a doubtful nature, on the thigh, ſcrotum, &c. or even the pox itſelf, one, two, or more years before, though they had long imagined themſelves perfectly and radically cured. I have indeed been told by ſome eminent phyſicians, that buboes ſometimes ariſe without any previous run-

ning or ulceration; but as no ſuch caſe ever fell under my inſpection, I muſt ſtill remain in uncertainty.

It has been aſſerted, even by ſome late writers, that this diſeaſe may be caught by lying in the ſame bed with or after an infected perſon. But this, from the moſt accurate obſervations and experiments I have made upon the ſubject, I have never been able to confirm. Nor do we ever ſee nurſes infected in the Lock Hoſpital, where they live night and day with patients in all ſtages of the diſtemper. The fact ſeems to be, that patients are apt to impoſe upon themſelves, or upon phyſicians and ſurgeons, with regard to this matter; and the above opinion eaſily gains ground among the vulgar, eſpecially in countries where ſuperſtition is more prevalent, or where they are more influenced by their ſervile ſituation in life, or other circumſtances. Hence we ſometimes hear the moſt ridiculous accounts given in thoſe countries, by friars and common ſoldiers of the manner in which they were infected with this diſeaſe.

Another queſtion, which I am equally unable to decide, is, Whether the venereal poiſon ever infects any fluid of our body beſides the mucus and lymphatic ſyſtem. Hence I am in doubt, whether the venereal poiſon in an infected woman ever affects the milk, and conſequently whether the infection can thus be conveyed to the infant by the milk alone, without any venereal ulcers on or about the nipples. It is equally a matter of uncertainty to me, whether the venereal diſeaſe is ever conveyed from an infected father or mother,

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by coition. to the fœtus, provided their genitals are ſound; or, whether a child is ever infected in the uterus of a deceaſed mother. Such infected infants as came under my obſervation, and that of my friends, whoſe practice affords them frequent opportunities of ſeeing new-born infants, ſeemed rather to militate againſt the opinion. Neither I myſelf, nor any of them, have been able to obſerve ulcers of a venereal kind upon new born children; and ſuch as make their appearance four, ſix, eight, or more days afterwards, on the genitals, anus, lips, mouth, &c. or the diſcharge like a gonorrhœa, which ſometimes takes place, may probably be ſuppoſed to ariſe by infection, during the paſſage, from ulcers in the vagina of the mother, the ſkin of the infant being then nearly as tender as thoſe parts which are not covered with the cuticle in adults; and this is perhaps the only time when an abſorption of the venereal poiſon might take place without a previous excoriation or ulcer of the ſkin.

All the ways, therefore, by which the venereal poiſon may be communicated from an unhealthy to an healthy perſon, may be reduced to the following heads.

1 The moſt frequent method is, by the coition of an healthy perſon with another who is infected, either with a venereal gonorrhœa, or venereal ulcers of the genitals.

2. By the coition of an healthy perſon with another apparently healthy, in whoſe genitals the poiſon lies concealed, without having yet produced any bad ſymptoms. Thus, a woman who has perhaps

perhaps received an infection from a man two or three days before, may, during that time, infect, and often does infect, another man, without having any ſymptom of the diſeaſe viſible upon herſelf; and, *vice verſa*, a man may infect a woman in the ſame manner.

3. By ſucking. In this caſe, the nipples of the wet nurſe may be infected by venereal ulcers in the mouth of the child; or, *vice verſa*, the nipples of the nurſe being infected, will occaſion venereal ulcers in the child's noſe, mouth, or lips.

4. By expoſing to the contact of the venereal poiſon any part of the body either covered with the cuticle or not, by kiſſing, touching, &c. eſpecially if the parts ſo expoſed have been previouſly excoriated, wounded, or ulcerated, by any cauſe whatever. In this manner, we frequently ſee venereal ulcers ariſe in the ſcrotum and thighs; and there are ſome well-atteſted inſtances where the infection took place in the hands of midwives or ſurgeons. I have likewiſe ſeen venereal ulcers produced in the noſtrils, eye-lids, and lips, of perſons who had touched the genitals either of themſelves or others affected with the gonorrhœa or venereal ulcers, and then rubbed their noſtrils, &c. with their fingers, without previouſly waſhing their hands.

5. By wounding any part of the body with a lancet or knife infected with the venereal virus. In this there is a ſimilarity between the venereal poiſon and that of the ſmall-pox. We have ſeveral examples of the latter being produced by bleeding with a lancet which had been previouſly employed

ployed for the purpoſe of inoculation, or of opening variolous puſtles, without being properly cleaned afterwards; and Van Swieten relates ſeveral inſtances where the lues was communicated by a ſimilar careleſſneſs in cleaning the inſtrument uſed in bleeding or ſcarification. We had laſt year a melancholy example here of a young lady, who having drawn a decayed tooth, and replaced it with one taken immediately from a young woman apparently in health, was ſoon after affected with an ulcer of the mouth. The ſore manifeſted itſelf to be of a venereal nature; but ſuch was its obſtinacy, that it reſiſted even the moſt powerful mercurial remedies, terminating at laſt in a caries of the maxilla, with a moſt ſhocking eroſion of the mouth and face, by which the unhappy patient was deſtroyed; and all this without the ſmalleſt diſorder being perceived in the woman from whom the ſound tooth was procured.

No branch of the medical art has, as far as my knowledge extends, received ſo many valuable improvements from modern practice as the treatment of the different venereal complaints; and I believe, that, amongſt the various diſeaſes to which mankind are ſubject, there is none of which the cure is now more eaſy and certain than the venereal diſeaſe, if properly and judiciouſly treated; but when neglected, or unſkilfully treated, it is often rendered obſtinate, and ſometimes nearly incurable; and it is a well-known truth, that many people ſuffer more, and have their conſtitution broken by prepoſterous treatment in this diſeaſe, than perhaps by the diſeaſe itſelf, if they had

had applied nothing at all. Yet there is ſcarce any diſeaſe whatever in which more people pretend to ſkill than this; and among the whole herd of quacks, there is ſcarce one who does not pretend to ſome ſuperior knowledge, or to the poſſeſſion of ſome particular noſtrum, which he ſets forth as an infallible remedy for this diſorder in all its various ſtages. Thus, with conſummate impudence, he impoſes on ſuch patients as have the misfortune to fall into his hands, and who ſooner or later are generally ſure to ſuffer ſeverely for their credulity. It is, however, certain, that to be able to cure this diſtemper in all its various ſtages, requires not only a great degree of judgment in the choice and doſe of the medicines, but likewiſe ſuch a thorough knowledge of the conſtitution of the patient, as is not to be obtained but by a long experience and judicious obſervation. Hence more than common abilities are often requiſite perfectly and radically to cure a confirmed lues, or venereal complaints which have been preposterouſly treated. The great number of unfortunate victims to ignorance and rapacity, which we daily obſerve, are but ſo many confirmations of the truth of this aſſertion.

From the moſt authentic accounts, it cannot be doubted that venereal complaints were formerly much more violent, dreadful, and even not unfrequently fatal. This is generally imputed to the more malignant nature of the poiſon at that time; and it is imagined that afterwards it grew more mild. But this opinion ſeems to me to be deſtitute of any ſolid foundation. I have ſeen the

diſeaſe,

diſeaſe, and all its different ſhapes, not in ten or twenty, but in hundreds of inſtances, as violent and inveterate as ever deſcribed by any author of the 16th or 17th century. All that can be ſaid is, that we ſee thoſe dreadful complaints now more ſeldom in Europe in general. This, I think, is not owing to the difference of climate, as ſome might imagine; but to the improvements made in the treatment of this diſeaſe, and more eſpecially to the enlightened principles of humanity ſpreading all over Europe, and happily ſucceeding the barbarous ſuperſtition and cruelty of former times. We no longer abhor or expoſe thoſe poor unhappy wretches on the dunghill, or let them die, as the Kalmucks do their brethren and children affected with the ſmall-pox, without giving them the leaſt aſſiſtance: both ſexes, being in our times leſs expoſed to the prejudice of others, apply ſooner for relief, and obtain it more eaſily from more humane and better inſtructed perſons; and I am perſuaded it is owing principally to this, that the diſeaſe is not only leſs frequent, but in all its different ſymptoms leſs violent, in this capital, than in any other in Europe. People of the lower claſs have not only ſo many hoſpitals or diſpenſaries, where they get advice and medicines from unprejudiced and ſkilful perſons, for nothing; but thoſe of the female ſex, who would be perhaps detained by ſhame from applying to ſuch a place, eaſily find a gentleman who gives them money to ſupport them during their miſerable ſituation, and as eaſily a medical man who cures them without expecting any remuneration whatſoever. I know this is nowhere

where the caſe abroad; beſides, the generality of phyſicians and ſurgeons, not having the advantage of ſuch a liberal education, have more confined notions, and often but a very ſuperficial knowledge of this diſeaſe. Our phyſicians and ſurgeons do not think themſelves authoriſed to reproach their venereal patients with their miſery in a rude and inhuman manner, or to let thoſe poor creatures ſuffer as inſtruments of his vengeance, or, in order to pleaſe God Almighty, think themſelves appointed by Heaven to puniſh rather than relieve them, as I have a thouſand times heard even in great capitals in different parts of the continent. Our magiſtrates and police do not force theſe wretches into a priſon, or into an hoſpital, not very different from a priſon, but put in their way all poſſible means to procure relief for themſelves. In other countries, where government purſues a different plan, where patients have no place of reſort, where they are expoſed to die of hunger during the cure, or where they are even intimidated from applying in time, in thoſe countries I have frequently ſeen the diſorder in its moſt horrid ſtages, and ſuch as are almoſt unknown in this country. In ſhort, let a perſon make the tour of Europe, and only take notice of the venereal patients, as well thoſe who are confined in hoſpitals, as thoſe who live or die unnoticed, under the moſt horrid ſymptoms of this diſeaſe, in their private abodes; and he will be able to form as ſolid a judgment of the comparative progreſs of enlightened principles of governments in different countries, from theſe obſervations, as from any other enquiry whatſoever. He will

will be aſtoniſhed to find at this day ſuch a difference between the ſeveral governments with regard to barbarity and humanity, as I found with reſpect to ſcience, not many years ago, between two modern univerſities; I mean *Gœttingen* and *Louvain*. In the former, every inſtitution is calculated to inculcate upon the minds of young men every kind of uſeful knowledge, and the moſt liberal principles of philanthropy; whereas, in the latter, every thing ſeems to conſpire to keep the youth in ſuperſtition and ignorance, and to engrave in their hearts all the principles of intolerance, and hatred of true learning of every kind, for which we now ſo juſtly blame our forefathers.

I have at leaſt hitherto found the frequency and the violence of venereal complaints in different countries, to be exactly in proportion to the degree in which learning is encouraged by government, and liberal principles diſſeminated among the people. From theſe obſervations, I am convinced, that if a judicious plan, with proper regulations and precautions, was adopted by any government, in whatever climate, all the violent ſymptoms of the venereal diſeaſe would not only be rendered uncommon, but the diſeaſe itſelf might be, if not entirely eradicated, at leaſt greatly diminiſhed in its frequency; but ſuch a plan, though eaſily conceived and executed, ſeems not yet adapted to the taſte of the preſent age, but perhaps rather calculated for our humane and more enlightened poſterity.

CHAP.

CHAP. II.

On CLAPS (BLENNORRHAGIA.)

THE *Clap* (*Blennorrhagia*) or as it is commonly called the *virulent Gonorrhœa**, is a local inflammation, attended with the discharge of a puriform matter from the urethra in men, and from the vagina in women; accompanied with a frequent desire of making water, which occasions a scalding, or pricking and burning pain, during the time of its passage; and arising from any stimulus applied to those parts, provided it be sufficiently strong. Sometimes, by the violence of the irritation, the secretion of mucus seems to be totally

* The name *Gonorrhœa* is derived from the Greek γονη, *genitura*, *semen*, and ῥεω, *fluo*, i. e. *fluxus seminis*; which is a very improper name for the disorder in question, because it conveys an erroneous idea. The name *Gonorrhœa* implies a discharge of semen, which never takes place in this disorder. If a Greek name is to be retained, I would call it *Blennorrhagia*, from βλεννος *mucus*, and ῥεω, *fluo*; *i. e. Mucifluxus* (*activus*); and thus distinguish it both from real *gonorrhœas*, and from *gleets*, to which latter I would give the name *Blenorrhœa*, *Mucifluxus* (*passivus*), *i. e.* without phlogistic symptoms. In English, the disease is commonly called a *Clap*, from the old French word *clapier*, a single lodging of a common woman; in German, a *Tripper*, from dripping; and in French, a *Chaude-pisse*, from the heat and scalding in making water: names derived from the principal symptoms of the disease. See the *Nosological Table* of this disease at the end of the following chapter.

totally ſuſpended, or at leaſt conſiderably diminiſhed, ſo that no diſcharge, or only a very ſmall one, takes place, tho' the other ſymptoms rage with the utmoſt violence. In this caſe, the diſeaſe has obtained the very improper name of *gonorrhœa ſicca*, as if we were to ſay, *fluxus ſeminis ſine fluxu*. Another ſymptom is a violent pain during erection, from the tenſion of the frænum, which has obtained the peculiar name of *Chordeè;* but as theſe diſtinctions denote only the violence of ſome particular ſymptom, there is no occaſion for retaining them.

This diſtemper, we may obſerve, 1. Is a local inflammation; and therefore, like all others of the ſame kind, does but ſeldom affect the whole ſyſtem. 2. The diſcharge, though the matter has a purulent appearance, is not a real *pus*, much leſs *ſemen*, as ſome patients fancy. The matter diſcharged is nothing elſe but merely the mucus of the urethra or vagina ſecreted in a larger quantity than uſual, and changed in its colour and conſiſtence by the ſtimulus applied to the parts; like the mucous diſcharge from the noſe or lungs in a coryza, or cough from cold, where the mucus aſſumes nearly the ſame purulent appearance. It is an erroneous notion, that this diſcharge ariſes always from an ulcer in the urethra. In ninety-nine out of an hundred gonorrhœas, perhaps, there is no ſuch thing as an ulcer; but the diſeaſe is merely a ſuperficial inflammation of the internal membrane of the urethra, like that above mentioned of the mucous membrane of the noſe or

lungs from cold*. For in this laſt caſe, though the diſcharge has much the appearance of purulent matter, we know that it never proceeds from an ulcer in the noſe or lungs. Thus we may eaſily account for the quantity of the matter diſcharged; and have no reaſon to be ſurpriſed, that ſo large an excretion as is frequently obſerved in violent gonorrhœas, ſhould ſo little affect the conſtitution: while if an equal quantity of ſemen, or real pus, was diſcharged, we ſhould find the conſtitution and ſtrength of our patients materially injured; which is, however, but ſeldom the caſe, even in the moſt virulent gonorrhœas. 3. I have ſaid, that the diſcharge may proceed from any ſtimulus of

* This has been hitherto rather ſuppoſed, than proved by any direct fact. Anatomiſts examining the urethra of men who had laboured during their lifetime repeatedly under gonorrhœas, found, after death, no cicatrix in the urethra; and thence the concluſion was drawn, that gonorrhœas were generally not accompanied with an ulceration. This, however, would, in my opinion, prove little or nothing; as we ſee daily, that ſhancres on the prepuce or glans, though ſometimes pretty deep, go off, and are a ſhort time after ſo obliterated, that not the leaſt mark of a former ulcer or cicatriſation is to be ſeen. To conclude thence, that there has never been any ulcer, becauſe in ſuch a cadaver we find no cicatriſation on the prepuce or glans, would in this caſe be evidently wrong. But what anatomiſts have hitherto only ſuppoſed, is now made evident by my friend Dr *Stoll*, Profeſſor of the Practice of Phyſic at Vienna. He had two years ago the inſtructive opportunity of diſſecting a man who died in his hoſpital, while labouring under a virulent gonorrhœa. On opening the urethra carefully, he found its internal ſurface preternaturally red; two of the lymphatics preternaturally white and enlarged; and the puriform matter oozing out from the internal membrane, eſpecially at the lacuna, where the ſeat of the diſorder was, without the leaſt appearance of an ulceration or excoriation.

of ſufficient power applied to the parts. To diſcuſs this latter ſubject more fully, I ſhall conſider it under the three following heads.

I. I am of opinion, that virulent gonorrhœas, "ariſing from an *external* cauſe, are actually excited by the ſtimulus applied to the cavity of the "urethra itſelf;" and that conſequently, in coition, the virulent mucus of the vagina is driven, or, if I might ſo ſay, forced into the urethra, and not, as ſome writers have imagined, abſorbed by the lymphatics of the glans penis, and thence depoſited at the lacuna under the frænum.—If ſuch an abſorption actually took place, we ſhould every day obſerve virulent runnings ſeated low down in the urethra, as well as under the frænum; whereas this is ſeldom or never the caſe. The ſeat of theſe gonorrhœas is always originally in the lacuna under the frænum; and thoſe which are found to have their ſeat at the curvatura penis, or lower down in the urethra, are not ſo at the commencement of the diſeaſe, or ariſe from an internal cauſe. What has been ſaid of the impoſſibility of ſuch an immediate application of the virus to the inſide of the urethra, becauſe its orifice is cloſely ſhut up during erection, and therefore admits not of any ſuch introduction, appears to me only to be reaſoning from an ill-grounded theory*.

* What is ſaid here relates only to thoſe gonorrhœas which ariſe from a cauſe externally applied. But though venereal gonorrhœas do generally ariſe from an external cauſe, it is highly probable to me, that they may ſometimes be excited by the poiſon depoſited from the maſs, as we ſee not unfrequently with regard to ſhancres.

II. I ſhall prove, both from well-eſtabliſhed principles, and from practical obſervations, "that "gonorrhœas not only may, but moſt frequently "do, ariſe from the ſame venereal poiſon which, "applied to other parts of the body, produces "ſhancres, or other ſymptoms of the lues."—It has of late been aſſerted, even by ſome phyſicians of eminence, that the poiſon which produces a gonorrhœa, is different from that which produces the lues; and ſeveral ſpecious arguments have been brought in favour of this paradoxical opinion. This diſpute concerning the nature of gonorrhœas, leads me into a diſcuſſion the more agreeable, as it is of conſiderable importance in practice, and as experiments and obſervations will, I think, enable me to prove not only the contrary, but perfectly to reconcile the different opinions, and thus ſet the matter in a clear light, and free it from that obſcurity in which it has been hitherto involved. I enter therefore into the diſcuſſion of this ſubject with the conſideration of the different reaſons alledged for that favourite doctrine.

Firſt, It is ſaid, That *the poiſon which produces the gonorrhœa does never, like that of ſhancres, produce any venereal ſymptoms in the maſs, or the lues itſelf.* To this I reply, that though a lues is ſeldom produced by a gonorrhœa, yet we are by no means to look upon this as univerſally true. The reaſon why gonorrhœas do not, like ſhancres, conſtantly produce the lues, is, that moſt of them, if not ill treated, excite only a ſuperficial inflammation in the internal membrane

of

of the urethra, without any ulceration. Hence abſorption cannot eaſily take place, the poiſon being out of the courſe of the circulation. But I have ſeen gonorrhœas, through injudicious treatment, or where the diſeaſe had been originally accompanied with an ulcer of the urethra, followed by the moſt unequivocal ſymptoms of the lues itſelf. The reaſon why the venereal poiſon indeed, when applied to the urethra, does not ſo frequently produce ulcers as when applied to the glans, prepuce, and other external parts, is, that the internal membrane of the urethra is defended by a large quantity of mucus, the ſecretion of which is moreover augmented, ſometimes to a ſurpriſing degree, by the preſent ſtimulus. As long as this mucus is ſecreted in ſuch abundance, the poiſon is inveloped, the urethra defended, and thus the formation of ulcers effectually prevented; but if, either from the violence of the irritation, or from any other cauſe, this ſecretion is diminiſhed, or if by improper injections the mucus be waſhed away while ſome of the poiſon remains, I am of opinion, from more than twenty inſtances which occurred to me, that in nine ſuch caſes out of ten, an excoriation or ulceration of the urethra, and ſubſequent pox, will be as certainly the conſequence, as from venereal ulcers in any other part of the body. If there was the ſame quantity of mucus between the prepuce and the glans, as there is in the cavity of the urethra, we ſhould as ſeldom ſee ulcers there as we do in the urethra in caſes of ſimple gonorrhœa. We obſerve, that when the poiſon meets there with a large quantity

of mucus, as is ſometimes the caſe, it then produces no ulcers, but only a great ſecretion of puriform mucus, which is called a *gonorrhœa ſpuria*, but might with more propriety be termed a *Blennorrhagia balani, i. e.* an active diſcharge from the glans or corona glandis. The reaſon why this kind of running is leſs frequent than thoſe from the urethra, appears to me to be, the ſmall quantity of mucus which in moſt people is ſecreted in theſe parts; whence the virus, not being ſufficiently diluted, commonly produces theſe eroſions, or venereal ulcers, called ſhancres.—This likewiſe receives a conſiderable confirmation from the well-known fact, that women very ſeldom have ſhancres in the vagina, though very frequently in the labia pudendi and nymphæ. The mere want of a ſufficient quantity of mucus on the latter, accounts, in my opinion, ſufficiently for this effect.

Secondly, They maintain, that *the poiſon of the gonorrhœa never produces ſhancres, and that the poiſon of ſhancres never produces a gonorrhœa.*—In confirmation of this aſſertion it has been ſaid, that a perſon who has ſhancres will never communicate any other complaint but ſhancres, and that a perſon who has a gonorrhoea cannot communicate any thing but a gonorrhoea. I will not deny that this is frequently the caſe; but repeated and attentive obſervation authoriſes me to ſay, that, like too many other medical writers, they have drawn a general concluſion from a few obſervations favourable to their own preconceived opinion. For in many caſes where I had occaſion to examine both parties, I have been convinced, that ſhancres were

were communicated by a perſon affected with a ſimple virulent gonorrhœa; and, *vice verſa*, that a virulent gonorrhœa had been the conſequence of an infection from a perſon having ſimple ſhancres only. But there is a more ſtriking proof than this, which has not been taken notice of, viz. if a patient afflicted with a venereal running does not take care to keep the prepuce and glans perfectly clean, ſhancres will very often be produced, the cauſe of which may evidently be traced to the matter of the gonorrhœa. This is one of the principal reaſons why in caſes of gonorrhœa we inſiſt ſo much on the parts being kept clean; experience having taught us, that ſhancres frequently ariſe from negligence in this particular, even ſometimes after the running has conſiderably abated. For the ſame reaſon, I conſtantly order theſe patients to keep their hands clean; having ſeen repeated inſtances of venereal ulcers in the noſe and eye-lids being the conſequence of this neglect. But beſides this, will any man of the medical profeſſion doubt, that matter taken from a ſhancre, and applied to the urethra, would not produce a gonorrhœa? This is an experiment which I certainly ſhould not venture to try on myſelf. I muſt conclude, therefore, that though the writers who have aſſigned this ſecond reaſon may be right in a few caſes which fell under their own obſervation, they are wrong in deducing a general rule from a few facts; as I myſelf ſhould be, in concluding from ſeveral contrary inſtances which I have obſerved, that a gonorrhœa always communicates ſhancres, and ſhancres always a gonorrhœa.

—Some caſes of this kind I have ſeen, as already mentioned, where, in the fourth or fifth week of an ill-treated gonorrhœa, or from a neglect of external cleanlineſs, ſhancres have been produced in places that had been perfectly well before: but this ſurely would be a very ſlender reaſon for aſſerting, that ſuch is always the caſe. Theſe ſhancres ariſing from the matter of a gonorrhœa, were, to my obſervation, conſtantly as virulent and infectious as original ones; and, like theſe, when left to themſelves, produced the ſame pernicious ſymptoms in the body; and if a perſon who has ſuch ulcers was to believe that they are not venereal, nor capable of bringing on the lues, becauſe they ſo plainly originated from the matter of a gonorrhœa, he certainly would find himſelf moſt diſagreeably miſtaken.

Thirdly, The laſt, and, in their opinion, the moſt unanſwerable reaſon for believing that the virus of a gonorrhœa, and of a confirmed lues, are materially different, is, as they ſay, that *mercury never contributes to, or accelerates the cure of a gonorrhœa; but that, on the contrary, every gonorrhœa may be certainly cured without mercury, and without any danger of leaving the lues behind.*—— To this I reply, that it is indeed a certain and authenticated fact, that a great many gonorrhœas may be, and are, cured without mercury. I have ſeen many inſtances, where water, drunk for a conſiderable time, has cured the gonorrhœa fully as well as any medicine whatever. Nature is very often able to effect a cure in acute diſtempers, if we would allow her to proceed undiſturbed in her operations.

operations. Nature, when irritated by the poiſon, will excite a greater ſecretion of mucus than uſual, in the ſame manner as the lachrymal gland pours out a larger quantity of water when a grain of ſand falls into the eye. This larger quantity of mucus anſwers the purpoſe of diluting the poiſon as effectually as any medicine artificially injected. Beſides, the poiſon is by this means, not only diluted, but carried off in part by the running; and the modern practice of curing gonorrhœas, by injecting ſweet oil, or other mucilaginous liquors, into the urethra, does nothing but aſſiſt Nature in this ſalutary work.

But though I allow that gonorrhœas may generally be cured without mercury, yet repeated experience has ſhown me, that it is not always poſſible to accompliſh a cure in ſuch an agreeable manner. In thoſe caſes where the gonorrhœa is of a milder kind, without any ulcer or excoriation in the urethra, it may certainly and radically be cured without uſing a grain of mercury: and though mercury ſhould be given in ſuch caſes internally, it cannot have the leaſt effect; not becauſe the diſeaſe does not proceed from a venereal poiſon, but becauſe it lies out of the reach of the circulation.

To what is further alleged, that mercury never ſhows any power in accelerating the cure of a gonorrhœa, I reply, That they not only confound the runnings which ariſe from the venereal virus, with thoſe which are occaſioned by other cauſes; but that they do not make a proper diſtinction between the internal uſe of mercury and the topical application

application of it. I readily allow, that mercury given internally cannot cure ſimple gonorrhœas, as the cauſe of the diſeaſe lies out of its reach. But the ſame conſequence cannot be drawn concerning its topical application. I am indeed perfectly convinced, not only that mucilaginous injections, combined with mild mercurial preparations, contribute to the cure, but that they are the ſafeſt, ſpeedieſt, and beſt of all methods for that purpoſe: though I do not deny, that in ſimple gonorrhœas mercury applied in this way does not always produce beneficial effects; which, however, is often owing, I think, to the uſe of improper preparations.

It muſt alſo be obſerved, that in this diſpute the contending parties ſeem to have entirely overlooked the diſtinction between the ſimple venereal gonorrhœa, and that combined with an ulceration of the urethra: and of ſuch importance is it to attend to this diſtinction, that daily experience ſhows us, that runnings of the latter kind are not only cured more ſafely and expeditiouſly by the uſe of mercury, but that they are very often, if not always, totally incurable without it; and that the gleets remaining after theſe gonorrhœas, tho' they obſtinately reſiſt all other remedies, yet frequently very readily yield to the uſe of mercury, either externally or internally applied. I can even affirm with certainty, that a gleet of this latter kind, of any ſtanding, can never be radically cured without it.

I now proceed to examine the laſt part of this objection, viz. That a gonorrhœa never leaves a lues behind.

behind. This they have, no doubt, very frequently obſerved; but here they fall into the ſame miſtake as formerly, by not diſtinguiſhing ſimple gonorrhoeas from thoſe accompanied with an ulceration of the uretha. Indeed it muſt be allowed, that an abſorption cannot eaſily take place in ſimple gonorrhoeas: though I confeſs it to be yet a matter of doubt with me, whether even in this caſe an abſorption and conſequent lues do not *ſometimes* happen; at leaſt we have not a ſufficient number of obſervations to determine this point with certainty.

But whatever may be the caſe in ſimple gonorrhoeas, it is certain, that when the diſeaſe is accompanied with an ulcer of the urethra, the parts are then diſpoſed to an abſorption of the virus. In theſe circumſtances, I never met with a ſingle patient in whom this abſorption did not take place; and, if early recourſe was not had to mercury, the lues moſt certainly was the conſequence. I have alſo met with ſeveral inſtances, where, from the accidental wounding of a ſmall blood-veſſel in the urethra by the unſkilful application of the ſyringe or catheter, the virus of a ſimple gonorrhœa has been abſorbed, and produced unequivocal venereal ſymptoms in the ſyſtem, which, notwithſtanding their origin, yielded very readily to mercury. We may therefore aſſuredly conclude, that there are ſome gonorrhœas which cannot be cured without mercury; though there are others which may be removed, without the uſe of that remedy, and without any bad conſequence enſuing. An account

count of ſome inſtances which came under my obſervation, will ſet this matter in a clearer light.

A young man of about twenty-three years of age, in perfect health, happened to be infected with a ſimple gonorrhœa, without any other venereal ſymptom. The running had been injudiciouſly ſtopped; the conſequence of which was a total ſuppreſſion of urine. A ſurgeon was called; and the patient being unable to bear any longer the pain from the diſtention of the bladder, recourſe was had to the catheter. But on approaching the neck of the bladder, a great reſiſtance was found, which prevented the inſtrument from being further introduced, though every poſſible method was tried. After waiting a little while, a ſecond attempt was made but without ſucceſs. As the pain increaſed, and from the accumulation of urine there was great danger of a rupture of the bladder, a paſſage for the catheter was at laſt forced with as little violence as poſſible; which was ſucceeded by ſome drops of blood from the urethra, and followed by a large diſcharge of urine. By proper treatment, the patient recovered in a few days from this dreadful ſymptom; the gonorrhœa came on again; and, in a ſhort time after, he was thoroughly cured, as we imagined. But ſoon after, although there had not been the leaſt appearance of a ſhancre throughout the whole courſe of the diſeaſe, an exoſtoſis, with a violent pain about the middle of the ſternum, made its appearance. Mercury was adminiſtered; in a few days the patient found himſelf better, and in five weeks was perfectly cured.—Now, from an attentive conſi-

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deration of this caſe, I would aſk any unprejudiced perſon, Whether it is not reaſonable to ſuppoſe, that by forcing in the catheter ſome veſſel had been wounded, in conſequence of which the abſorption took place; that the patient was from that moment infected, and afterwards cured in the ſame manner as if he had received the infection from a ſhancre*?

A gentleman of about forty years of age, who formerly had laboured under different gonorrhœas till within theſe laſt five or ſix years, got a clap; which he found, as he ſaid, rather mild, without much pain in making water, and hardly any pain in erection the firſt five or ſix days; when, after violent exerciſe, he felt the whole urethra, but eſpecially the neck of the bladder, more irritated; for which, however, he took nothing but a mercurial purgative, and rubbed into the perinæum ſome mercurial ointment every day. Theſe ſymptoms, together with the running, were nearly gone in eight days, leaving only a little ſoreneſs in the perinæum. But the complaint for which he now conſulted me was a pain in the xyphoid cartilage,

* The different period of time at which the venereal diſeaſe and the gonorrhœa firſt appeared, has alſo been urged as an argument for the difference between the virus of the gonorrhœa and that of the ſyphilis. But it is abſurd to oppoſe uncertainty to uncertainty: we are, I think, as ignorant of the preciſe period when the lues firſt appeared, as we are of that of the gonorrhœa.—It has been aſſerted, that the inhabitants of the South-Sea iſlands, though afflicted with the lues, are yet free from the gonorrhœa. But Captain KING, who ſucceeded Captain Clerk in the late voyage round the world, aſſured me that this was falſe, and that he himſelf had ſeen many of them with the matter dripping from their urethra.

cartilage, ſo violent indeed, that he even could not bear the touch. I adviſed him to rub in ſome more mercurial ointment into the perinæum for a couple of days: when I ſaw him again, the pain was not milder, but had left its former place, and occupied now the middle of the ſternum, which troubled him eſpecially laſt night. I ordered him to take mercury internally; by the uſe of which, this complaint in a ſhort time after diſappeared.—See alſo the Caſe related p. 4.

Thus far I have anſwered the arguments which were adduced to prove, that the gonorrhœa is never of a venereal nature, or, in other words, that it never proceeds from a poiſon of the ſame nature with the lues. But though I have ſhown that this doctrine is exceptionable, yet I am far from maintaining that all gonorrhœas ariſe from the venereal virus. On the contrary,

III. I am convinced, from experiments made on myſelf, and from obſervations made upon others, "that gonorrhœas are ſometimes produ-"ced from other acrimonies, or ſtimuli, applied "to the urethra, with nearly the ſame ſymptoms "as we obſerve in a venereal gonorrhœa;" nay, I am now even inclined to believe, that ſuch gonorrhœas may ſometimes be propagated as well as venereal ones. Whether the gonorrhœas, of which we have an account in ſome ancient writers, were of that nature, I am unable to determine; and therefore forbear to enter upon the ſubject. I ſhall only juſt obſerve, that the gonorrhœas, I am here ſpeaking of, are very different from the flux of real ſemen, or from the

flux

flux of mucus from the proſtate gland. Theſe latter complaints, ariſing chiefly from a weakneſs of the excretories of theſe parts, occaſioned by an abuſe of venery, and eſpecially by maſturpation, do not come within my preſent plan.

I proceed, therefore, to the main point, viz. to prove, that local inflammations of the urethra, accompanied with the running called generally Gonorrhœa, are not always of a venereal nature, neither in men nor women. This idea firſt occurred to me from having frequently obſerved in ſtone-horſes a kind of running of a greeniſh yellow matter from the urethra. This running, which ariſes from cauſes ſtill unknown to me, I have ſeen laſt only for a few days, and then go off ſpontaneouſly. The ſame, and that more frequently, I have obſerved in dogs, without perceiving that they ſeemed to ſuffer much pain from it; and though indeed they continued to lick the part almoſt conſtantly, they were never affected with any ulcer of the mouth. I have beſides, for theſe many years paſt, been conſulted, by a variety of patients, for runnings very ſimilar to venereal gonorrhœas, but often ſo mild in their ſymptoms, and ſo ſhort in their duration, that I began to doubt of their venereal nature. I have ſeen married people, who lived together in the moſt perfect harmony and friendſhip, where the one was affected with ſuch a diſcharge for ſeveral days, without communicating the leaſt ſymptom to the other. With ſome of them I have been moſt intimately acquainted; and convinced without a doubt, that they were faithfully

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attached to each other; and that therefore the diſeaſe muſt have been owing to ſome other cauſe.

All theſe obſervations taken together, led me to believe, that ſome kinds of running might perhaps owe their origin, not to the venereal poiſon, but to ſome different cauſe, either external or internal. I began to ſuſpect, that a diſcharge might be produced by any ſtimulus applied to the urethra, whether venereal or not, provided it be ſufficiently acrid to excite an inflammation, and conſequent preternatural ſecretion of mucus from the urethra; juſt as coryzas, accompanied with a large preternaturally coloured ſecretion from the mucous membrane of the noſe, ariſe from other cauſes. Having revolved theſe ideas in my mind for ſeveral years, I determined at laſt to make an experiment upon myſelf, which ſhould either confirm the theory I had laid down, or entirely overthrow it. With this view, I took ſix ounces of water, and dropped into it as much of cauſtic volatile alkali, as gave the mixture a very ſharp fiery taſte. This liquor I injected into the urethra, compreſſing the canal with the fingers of my other hand below the frænum, that it might be prevented from going further, and thus be applied to the very part which is generally the ſeat of the venereal gonorrhœa. The moment it touched the inſide of the urethra, I felt ſuch an unſupportable pain, that I could not retain it for a ſingle ſecond; but withdrew the ſyringe, much againſt my will, almoſt at the inſtant of injection, and the injected liquor ran out. But though the pain continued very ſevere for half

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a quarter of an hour, I reſolved to make a ſecond trial. It occaſioned a more ſevere pain than I ever remember to have felt in my life before, yet I retained it for very near the ſpace of a minute; when the pain became ſo excruciating that I could bear it no longer, and therefore withdrew the ſyringe. I inſtantly felt a ſtrong deſire to make water; but having taken this precaution before I made the experiment, I ſuppreſſed the inclination. I lay down on my ſopha, and waited the event with patience; but ſo violent was the pain, that it was near an hour before I was able to move. I then amuſed myſelf with reading during the remainder of the afternoon, eat my dinner as uſual, but went early to bed. I was now obliged to make water, which I had not done ſince the time of injecting the liquor. When the urine came to the place to which the injection had been applied, I felt a very ſevere pain, but leſs violent than what I expected. Having ſlept well during the night, I examined the part as ſoon as I awaked next morning, and found a pretty large diſcharge of puriform matter, of the ſame greeniſh-yellow colour with that in virulent gonorrhœas. The pain in making water was now greatly increaſed, and the following night my reſt was interrupted by painful involuntary erections. The morning after, the diſcharge was much more plentiful, nearly of the ſame colour, only perhaps a little more greeniſh; the pain in making water, however, was now ſo violent, that I reſolved to mitigate it by injecting ſome lukewarm oil of almonds.

By this it was greatly abated; the running continued five days, the pain all the while growing remarkably leſs in the part affected. But I now obſerved very diſtinctly a new inflammation taking place lower down in the urethra, where I had felt nothing before, and where none of the injection had touched. This new inflammation began, as it ſeemed to me, at the very border of the former, extending itſelf lower down in the urethra; and was followed by a copious diſcharge, attended with the ſame ſymptoms as before, and continued for ſix days; at the end of which, all the ſymptoms were greatly abated. But now, to my ſurpriſe, I felt diſtinctly the ſymptoms of a third inflammation taking place, extending from the border of the former about the caput gallinaginis to the very neck of the bladder, and attended by an ardor urinæ, and copious diſcharge like the preceding. At this I was ſeriouſly alarmed; for I had conſtantly injected the warm oil of almonds three times a-day. I perceived that the inflammation firſt excited by the cauſtic alkali was moſt evidently communicated from one part of the urethra to the other; whence I was afraid, that an inflammation of the whole internal ſurface of the bladder might at length enſue, and be attended perhaps with dangerous conſequences. In this ſituation I continued betwixt hope and fear for about ſeven or eight days; when I found at laſt, to my great ſatisfaction, this inflammation gradually abate, together with the diſcharge, without paſſing the limits of the urethra; and I was perfectly freed from every ſymptom of theſe three

diſtinct

diſtinct gonorrhœas, as I might call them, at the end of the ſixth week.

From this experiment upon myſelf, together with the above-mentioned obſervations, and from a very curious obſervation, ſince related in a diſſertation publiſhed by Dr Oettinger of Tubingen, where a diſcharge from the urethra, apparently ſimilar to that of a virulent gonorrhœa, was produced by the internal uſe of olive oil, which had been wrung out of red Turkiſh yarn, on which it had been poured before, the reader may judge, whether acrimonious ſubſtances, of a different kind from the venereal virus, ſuch as cancerous ichor, or perhaps other ſtimuli applied to the urethra, may not ſometimes produce the ſame ſymptoms as the cauſtic did in my experiment, and the oil in Dr Oettinger's obſervation. I certainly believe, that runnings ſimilar to a gonorrhœa from the venereal virus, are ſometimes produced from other cauſes, only perhaps with milder ſymptoms, and of ſhorter continuance; tho' on myſelf I could not perceive any difference in the colour, conſiſtence, or other circumſtances. And I now look upon the following facts as thoroughly eſtabliſhed, viz. 1. That gonorrhœas frequently ariſe from the ſame venereal poiſon applied to the inſide of the urethra, which, when applied to the glans, prepuce, &c. produces ſhancres, or when abſorbed into the ſyſtem, produces the lues; and, 2. That there are gonorrhœas which owe their origin either to acrimonious ſubſtances introduced into the urethra *ab extra*, or perhaps ſome-

times to a more violent mechanical ſtimulus ariſing during coition, or from ſome other cauſes hitherto unknown to us. Hence I divide the *Blennorrhagias*, at leaſt into two ſpecies eſſentially diſtinct from each other, viz. that ariſing from the venereal virus, which I call *Blennorrhagia ſyphilitica;* and into that ariſing from other acrid ſubſtances, to which I give the name of *Blennorrhagia ab acri, aut ſtimulo mechanico*. By attending to this difference our practice muſt be regulated as long as we are not thoroughly acquainted with the nature of other cauſes. It is owing to the neglect or ignorance of this diſtinction, that we hear quacks daily extolling the pre-eminence of their noſtrums or ſecret injections for curing the gonorrhœa in a few days, while patients ſometimes complain of being kept by the moſt experienced phyſicians for weeks together, though affected with what they imagine to be the ſame complaint.

The running which a gentleman of my acquaintance got ſome years ago, notwithſtanding, as he ſaid, he made uſe of the beſt preventative of all, was undoubtedly not from a venereal cauſe; and he may be equally well affected in time to come with the ſame complaint, though he now thinks himſelf ſafe, by what he calls, doubling his precaution.

The *ſimple ſyphilitic Blennorrhagia* ought further to be diſtinguiſhed from the *complicated*, or that accompanied with an ulcer in the urethra; the latter admits no radical cure without the internal uſe of mercury, whereas the former ſeldom or never requires it.

To the ignorance or neglect of the diſtinction between ſyphilitic gonorrhœas and thoſe ariſing from other ſtimuli, we are likewiſe to aſcribe the great difference among practitioners with regard to the mode of treatment. Some adviſe aſtringents, while others are laviſh in their praiſes of emollients. Hence, even ſome practitioners of eminence, having obſerved that aſtringent injections were of ſervice in ſome caſes of gonorrhœa, even in the ſtage of inflammation, recommend them to every patient affected with that complaint, but by no means with the ſame ſucceſs in all caſes. For, beſides violent pains in the whole courſe of the urethra, ſwelled teſticles, an acute ſuppreſſion of urine, &c. which are the frequent effects of theſe injections, if the diſeaſe is of a ſyphilitic nature, and eſpecially in its inflammatory ſtage, ſtrictures in the urethra, of the moſt troubleſome and obſtinate nature, are often the conſequence. By overlooking this neceſſary diſtinction, which applies to men as well as to women, the health of the patient is not only endangered, but the happineſs of married people has been deſtroyed, and the friendſhip betwixt the two ſexes has been frequently broken without reaſon. I have certainly ſeen more than one inſtance of this kind.

I ſhall only add here one remark more. It is by moſt people imagined, and ſeveral medical writers have even publicly aſſerted, that the *malignity*, as they call it, or the virulence, of a gonorrhœa, is always in proportion to the colour of the matter diſcharged, and that as ſoon as this colour changes into a whiter one their diſcharge is no

more infectious. But this appears to me by far too general a concluſion; for in ſome perſons I have ſeen the matter retain its original ſulphur colour to the very laſt day. The more certain ſigns of the abatement of the virulence of the diſeaſe are, the ceſſation of the ardor urinæ, and a capability of retaining the water as when in health; the matter becoming leſs, and of a thicker conſiſtence, ſo that it grows ropy, and may be drawn into threads between the fingers; and the abſence of pain or titillation during erections. The only certain ſigns, however, of a radical cure of the gonorrhœa, and of a perfect ſecurity of not being able to communicate the infection, are, the entire ceſſation of the running, erections, and excretion of ſemen, without any kind of pain, titillation, or heat in the urethra; and though in general we may aſſure our patients, the change of the greeniſh yellow colour to a white one is not an unfavourable ſign of the diſeaſe growing better, it is by no means a certain one of the venereal virus being entirely eliminated.

Having thus finiſhed my conſiderations about the nature and the different kinds of gonorrhœas, we now proceed to

The Method of Cure.

Here I muſt take notice of what I have eſtabliſhed before, that every kind of virulent gonorrhœa, or *Blennorrhagia*, is a local inflammation, excited by a peculiar poiſon or ſtimulus. If this poiſon

poiſon be venereal, the following indications will naturally preſent themſelves for all ſyphilitic Blennorrhagias, viz.

1. To remove the poiſon, or, if poſſible, to change its nature.

2. To defend the tender parts from its virulence.

3. To allay the irritation occaſioned by it.

Oily or mucilaginous injections, combined with opium and the mildeſt mercurial preparation, ſeem to anſwer all theſe different purpoſes*.

The internal uſe of the ſolutio Arabica, the emulſio amygdalina, or any other mucilaginous drink, taken largely, (with an anodyne draught at night according to circumſtances), is always uſeful, and for patients who have an averſion to injections abſolutely neceſſary.

If ſymptoms of an inflammatory fever appear, bleeding may ſometimes be uſeful; but, in general, more ſervice will be derived from topical evacuations of blood, and from emollient and ſedative fomentations and poultices. On the other hand, when the patient is of a weak and irritable habit of body, the diſcharge very thin and copious, attended with violent pain and a quick

* If we meet with patients who are prejudiced againſt the uſe of injections, and wiſh to be treated by internal medicines, we ought to acquaint them, that the diſeaſe may be cured equally well without any topical application; but that it will then require, perhaps, a little longer time, and the obſervance of a more exact regimen.

pulſe, I have found the Peruvian bark, given internally, according to circumſtances, with or without opium, more uſeful than the whole tribe of antiphlogiſtics; but opium given in emollient glyſters is ſometimes particularly uſeful in ſuch caſes. By the uſe of this medicine, the frequent painful erections are alſo much mitigated; but their return ought, as much as poſſible, to be prevented, by tying the penis down, lying on a matraſs on the ſide, and not in a warm feather bed on the back. If the erection is attended with a ſtrangulation of the glans, the treatment laid down under the article *Paraphymoſis* will be neceſſary.

In order to prevent the more violent ſymptoms of gonorrhœa, the patient ought, during its inflammatory ſtate, to uſe as little excerciſe as poſſible, to wear a ſuſpenſorium ſcroti from the beginning of the diſeaſe, and to keep the part affected as much as poſſible from the cold air. The ſuſpenſorium ſcroti, or truſs-bag, may perhaps ſeem ſuperfluous: but being ſo little troubleſome when well applied, and ſo well calculated to prevent a ſwelling of the teſticles, I never neglect to recommend it, eſpecially to thoſe who have once laboured under this latter diſeaſe.—With reſpect to the regimen to be obſerved in gonorrhœas, much exerciſe, external cold, high living, and drinking ſpirituous liquors, ought, in general, careſully to be avoided by all patients; but eſpecially by thoſe of a phlogiſtic habit of body, as they generally ſuffer more, and for a longer time, from this diſeaſe than others. Such patients

ſhould

ſhould confine themſelves to a low diet, rather of the vegetable than of the animal kind; they ſhould eat no ſupper, and drink nothing but cooling mucilaginous liquids; whereas thoſe of a different conſtitution are not to be reſtrained ſo much.

Neutral ſalts have been formerly recommended, to cool the blood, and to promote the ſecretion of urine, by which it was thought to mitigate the inflammation, and aſſiſt nature in the expulſion of the virus. But I have conſtantly found that they are hurtful. They increaſe the ſecretion of urine, render it ſharper, and thus augment the irritation, without producing any of the good effects aſcribed to them.

A prejudice in favour of purging in gonorrhœas has alſo long prevailed. For this purpoſe, ſome have uſed the mild, and others the more draſtic kinds of purgatives; but calomel, eſpecially, has been recommended to be given every two or three days. Neither of theſe medicines have I ever ſeen to do good, but frequently much harm. Beſides their tendency to promote the abſorption of the poiſon into the ſyſtem, like improper injections, they often give riſe to ſwelled teſticles, diſeaſes of the proſtate gland, ſuppreſſion of urine, ulcers of the urethra or bladder, &c. However, though purging is always improper, the body ought to be kept open, ſo that the patient may have a ſtool regularly; and I have no doubt that it is partly owing to this improvement of our practice, that we now ſo ſeldom obſerve ſymptoms of the lues, or ulcers of the bladder, following a gonorrhœa.

Thus far with regard to the more general run of the diſorder; but venereal gonorrhœas are not always ſo ſimple. Sometimes the poiſon ſeems to be of a more exalted acrimony, or rather meets with conſtitutions of a more irritable nature; or the ſymptoms are frequently exaſperated by improper treatment, or by neglect of the above mentioned rules. In this caſe, the patient feels a more violent heat and pain in making water, accompanied with a tenſion of the urethra, along its whole length; a perpetual deſire of making water, without being able to paſs more than a few ſcalding drops at a time; frequent erections, with moſt exquiſite ſhooting pains throughout the whole length of the urethra, but more eſpecially at the frænum. Sometimes ſtreaks of blood, or real blood, are diſcharged with the urine; and evident marks of an ulceration of the urethra make their appearance. In this caſe, beſides the above-mentioned remedies, the uſe of mercurial fumigations or frictions on the perinæum, and inſide of the thighs, I have found to be one of the moſt efficacious remedies.

The ſame treatment will prove ſerviceable, if, by any cauſe whatſoever, the diſcharge of the venereal gonorrhœa, during its inflammatory ſtage, be ſuppreſſed or ſtopped, either by acrid or aſtringent injections, or even by the moſt proper injections applied in an improper manner, by draſtic or repeated mild purges, by the premature uſe of turpentine or balſamics, by violent exerciſe, and eſpecially by catching cold in the part affected. The virus ſeems to leave its natural

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ſeat under the frænum, to ſettle lower down, where the excretory ducts of the ſeminal veſſels and proſtate gland open into the urethra, and produces a ſwelling in one or both teſticles; or, if the virus has been driven ſtill lower down to the neck of the bladder, the patient has a continual deſire to make water, without being able to paſs any, or only a few drops at a time. He is then often unable to ſtand upright for a quarter of an hour; and a total ſuppreſſion of urine is in this caſe frequently the conſequence. In all theſe different places, the poiſon generally produces only a ſuperficial inflammation, though not unfrequently alſo, by its virulence, or want of a ſufficient quantity of mucus to dilute it, an excoriation and ulceration in the urethra take place, which then never fails to end in an obſtinate gleet, and to be followed by a general infection of the maſs.

In ſpeaking of the dreadful conſequences of a ſuppreſſed or ſtopped venereal gonorrhœa, I muſt not omit to mention a diſeaſe, perhaps the moſt melancholy of all venereal complaints whatever, I mean a violent kind of inflammation in one or both eyes, frequently accompanied with a diſcharge of puriform matter, entirely ſimilar in colour and conſiſtence to that of a gonorrhœa, and generally terminating in perfect blindneſs; and in other caſes, inſtead of an ophthalmy, a more or leſs perfect deafneſs. Though I am by no means able to account for the origin of thoſe complaints ſuddenly following the ſuppreſſion of gonorrhœas, eſpecially from ſevere cold, (for I have

have never obſerved them but in very ſevere climates and ſeaſons), to which the patient had been previouſly expoſed, I am convinced of the fact. I ſhall ſpeak of it more fully below, under the head of Venereal Ophthalmy.

The only remark I have to make here is, that all theſe complaints from repelled venereal gonorrhœas, being very often attended with ſuch unhappy conſequences, an honeſt man ought not to mind the opinion of others, but be guided in his conduct by juſtice and conſcience, and do every thing that poſſibly may be done to cure or relieve his patient. I therefore mention here, that I have tried in four caſes of ſwelled teſtiles and ſuppreſſion of urine, ariſing from a retropulſed gonorrhœa, the inoculation of the venereal poiſon, by means of a bougie, dipped into venereal matter and introduced into the urethra, with unexpected ſucceſs. This being the caſe, I find myſelf bound not to conceal it, though I may poſſibly be blamed for it. We are conſulted for giving relief; and conſequently fulfil our duty, at leaſt, by offering a remedy, which the patient has always in his power to accept or refuſe.

CHAP. III.

On GLEETS (BLENNORRHŒA.)

A Continued running after the inflammatory ſymptoms of a gonorrhœa have for ſome time diſappeared, is commonly called a *Gleet Blennorrhœa*, or *Gonorrhœa inveterata* or *benigna;* a name merely relative to the former, which is called *Gonorrhœa maligna* or *virulenta*.

Gleets ariſe chiefly from two cauſes: 1*ſt*, From ſimple relaxation of the mouths of the veſſels, which had been irritated, inflamed, and thereby loſt ſomewhat of their contractile power; or, 2*dly*, From an ulceration, or an eroſion in ſome part of the urethra. To the former I gave, with more propriety I think, the name *Blennorrhœa ſimplex*, and the latter I called *Blennorrhœa complicata*. See the Noſological Table at the end of this chapter.

In the former kind, after the inflammation and irritation occaſioned by the gonorrhœa have ſubſided, the veſſels, from whence that diſcharge proceeded, continue to pour out either matter of the ſame puriform appearance, or only a clear kind of mucus, in a preternatural quantity. Sometimes a gleet begins to appear after coition, exerciſe, or free living, though the diſcharge from the preceding gonorrhœa had entirely diſappeared ſome days or weeks before.

Gleets

Gleets of this kind are for the moſt part only a local complaint, the ſimple remains of a gonorrhœa not perfectly cured; but thoſe of the ſecond kind may be conſidered as the remains of a very violent or complicated gonorrhœa, generally accompanied with an infection of the body.

Hence it appears, that the nature and ſeat of gleets may be as various as thoſe of gonorrhœas; but according to the place where they are ſituated, the time they have continued, and the cauſe by which they are produced, the method of cure muſt be different, and becomes more or leſs difficult and complicated.

Thoſe gleets are moſt eaſily cured which have their ſeat in the urethra under the frænum: thoſe originating from ulcers of the urethra, and which have continued for ſome time, are much more obſtinate; and thoſe ariſing from eroſions of the excretory ducts of the ſeminal veſicles, or proſtate gland, or from ulcers of the bladder, are the moſt ſtubborn of any. In general, the further back gleets are ſituated in the urethra, the more apt they are to produce a difficulty in making water, or ſtrictures and ſuppreſſion of urine; and the more difficult, in general, proves their cure.

I have always found thoſe gleets which ſucceed a ſimple gonorrhœa to be merely a local diſeaſe, and to owe their exiſtence ſolely to a relaxation of the ſmall veſſels after the inflammation has ſubſided. But ſuch gleets as ariſe after a violent or ill-treated gonorrhœa, are generally accompanied with an excoriation or ulceration of the urethra.

thra. In this caſe, the venereal poiſon has been generally abſorbed, and the maſs is of conſequence more or leſs infected.

As it is of the utmoſt importance, tho' ſometimes extremely difficult, to aſcertain theſe points, I ſhall endeavour to enumerate the moſt remarkable ſymptoms by which it may be known whether there is any ulceration in the urethra. They are ſhortly as follow: 1. Streaks of blood in the mucus, or real blood diſcharged, during the inflammatory ſtage of the gonorrhœa, as above mentioned; but more eſpecially after the violence of the inflammation has abated. 2. Real purulent, or thin ichorous matter, diſcharged in a greater or leſs quantity from the urethra. 3. A pain confined to one part of the urethra; but felt more particularly upon introducing the catheter, or preſſing on the urethra externally. 4. An acute pain in one particular place of the urethra, felt eſpecially in paſſing the laſt drop of urine, or the emiſſion of ſemen.——Though all theſe pretty plainly indicate an ulcer, its exiſtence will be much more confirmed, if the preceding ſymptoms of inflammation have been very high, if the patient has been improperly treated, or even, as I have ſometimes ſeen, if the urethra has been wounded by a miſmanagement of the ſyringe, or a rude application of the catheter, during the inflammatory ſtate.

By not attending to theſe marks, which ſufficiently point out the exiſtence of an ulcer in the urethra, we ſhall be often diſappointed in the cure.

cure. Whenever, therefore, we are conſulted about gleets, our firſt buſineſs ſhould be, to examine whether they ariſe merely from relaxation, or from an ulceration in the urethra; and in this latter caſe, whether it is an univerſal or only a local diſeaſe. If an ulcer has taken place, it will be neceſſary, in order to form a proper prognoſis, to aſcertain the place of that ulceration in the urethra.

When the diſeaſe is merely local, it may be cured either by topical aſtringent applications, or by internal corroborating or balſamic remedies, or by the union of both. The beſt topical remedies I have found, are injections made of white vitriol diſſolved in water, and mixed occaſionally with ſome grains of calx of lead or bolus Armena; or injections prepared with calomel ſuſpended in water, or in ſome mucilaginous fluid; or a ſolution of blue vitriol, of alum, or of verdigreaſe; each of which may in certain circumſtances be uſeful. Of the internal remedies recommended for the ſame purpoſe, I ſhall ſpeak hereafter.

If the diſeaſe is univerſal, i. e. accompanied with an infection of the whole ſyſtem, as is moſt generally the caſe where there is an ulceration of the urethra, we muſt, beſides topical remedies, have recourſe to thoſe appropriated to the cure of the lues itſelf. In this caſe, it is impoſſible to cure the gleet till we have firſt purified the maſs. After this is done, or while it is yet doing, I have found a ſolution of ſublimate and litharge in vinegar, diluted with a ſufficient quantity

tity of water, and injected two or three times a-day, a moſt excellent remedy.

With regard to injections in general, I ſhall make two material obſervations, the neglect of which may ſometimes occaſion our being diſappointed in a cure, even though the beſt remedies are uſed. The ſyringe made uſe of for this purpoſe ſhould have a ſhort but wide pipe, juſt ſo large that its orifice may go into the orifice of the urethra, and the piſton ought to apply cloſe to the ſides of the tube. If the whole pipe of the ſyringe be much ſmaller than the orifice of the urethra, it is attended with two conſiderable diſadvantages: the firſt is, that with a ſmall pipe, eſpecially if not perfectly ſmooth, the patient eaſily wounds the inſide of the urethra, thereby rendering himſelf liable to an ulceration of the part, and conſequent abſorption of the poiſon. The ſecond is, that the liquid injected, inſtead of going into the cavity of the urethra, will, in proportion as the patient preſſes the piſton, run out ſideways through the orifice of the urethra. If the piſton itſelf does not apply cloſely to the ſides of the ſyringe, even if the pipe is ſufficiently large, ſo that it perfectly cloſes the orifice of the urethra, the liquor will ſtill regurgitate between the piſton and ſyringe, inſtead of going into the urethra; and thus the patient may imagine that he has injected the liquor properly, when perhaps very little has entered. But though the ſyringe be properly made, and at the ſame time the moſt careful inſtructions be given, the patient does very often perform the operation in

ſuch an aukward manner, that no good effect follows.

A ſyringe properly made, ſhould be applied cloſely and exactly to the orifice of the urethra; ſo that, by the conic form of its pipe, all paſſage may be denied to the liquid betwixt it and the ſides of the urethra. If the diſorder lies in the uſual original ſeat of gonorrhœas, viz. juſt under the frænum, the patient ſhould, with one hand, compreſs the urethra at the firſt curvature of the penis, where the ſcrotum begins, while he holds and manages the ſyringe with the fingers of the other. The piſton, which ſhould always fit cloſe, but ſlide eaſily, ought then to be preſſed ſoftly and ſlowly, till he feels the urethra gently dilated, and thus keep the liquid injected for a minute or two in the urethra, repeating the ſame operation three or four times. By a raſh or longer-continued preſſure of the piſton, the irritation produced thereby in the urethra often does more harm than the injection can do good.

By attending to theſe directions, a double advantage is obtained. The liquid is properly applied to the part affected, at the ſame time that no danger is incurred of driving ſome of the venereal poiſon lower down the urethra along with the injected liquid; but this precaution is unneceſſary, if the ſeat of the diſorder is lower down.

With reſpect to the liquid itſelf, it ſhould always, in caſes of virulent gonorrhœa, be made lukewarm; but in gleets this is not neceſſary. In gonorrhœas, if the liquid is too cold or too warm,

warm, it may eaſily hurt the patient, either by driving back the matter, or increaſing the inflammation. In many inſtances alſo the liquid ought to be well ſhaken before it is injected. It may eaſily be made warm, by putting a tea-cup half full into a baſon of hot water. In all caſes, before any injection is applied, the patient ſhould attempt to make water.

The other obſervation I have to make is, that young men labouring under gleets, after having for ſome time made uſe of injections, and finding themſelves conſiderably better, will grow careleſs in the application, and even ſometimes neglect the injection altogether for a day or half a day. The conſequence of this is ſometimes diſagreeable: and I have ſeen ſeveral inſtances, where, by neglecting to uſe the injection for a ſingle day, the running has been greatly augmented, as if it had been a freſh gleet; and the relapſe being more obſtinate than the original diſeaſe, the patients have been obliged to continue the injections for more weeks, than perhaps it would have required days to cure the diſtemper, had they continued the uſe of them without interruption.

In general, in order to prevent any danger of a relapſe, I order my patients to apply the injections three, four, or, according to circumſtances, ſix times a-day during the diſeaſe, and to continue the ſame regularly for ten or twelve days after the running has entirely ceaſed.—Syringes of a different kind are required for women, if we wiſh to ſee any good effects produced by the in-

jections administered to them, as I shall mention below, under the *article of Venereal Ulcers.*

Besides injections, bougies will often be of great service in gleets, especially where the ulcer has its seat in the lower part of the urethra. They may be used either alone, or in conjunction with proper injections. They should be kept in, for the first three or four days, only for a quarter or half an hour at a time, until the patient is so accustomed to them that he can bear them longer; and then they may be kept in for several hours in the morning and evening, or during the whole day and night. It must be left entirely to the judgment of the physician to determine, whether the bougies to be employed should be of an irritating or sedative quality; the circumstances of the case will point out whether those of the former or latter kind are necessary. It must, however, be remembered, that before the application of bougies, as well as injections, the patient ought always to attempt to make water, in order to give time to the remedy to produce its effects on the part affected. If the application of the bougie produces, as I have sometimes observed, a tension and pain in the spermatic cord, or a swelling of the testicle, its use must be omitted for a few days. This effect I have sometimes also found to be produced by the use of too large a bougie, and to be removed by changing it for a smaller one; in general, small bougies should be preferred to large ones in the beginning.

Should we be disappointed in our expectations

of

of a cure, either by the uſe of bougies, or injections of the above-mentioned kind, it will be proper to inject ſuch liquids as may excite an irritation and inflammation in the urethra, eſpecially in the affected part. Theſe have often been attended with ſucceſs after the beſt aſtringents have failed. For this purpoſe, we may uſe an injection made with ſublimate and litharge, or a ſimple ſolution of ſublimate in water, or a large doſe of calomel ſuſpended in ſome mucilaginous liquor.

It has been obſerved by Dr Cullen, that obſtinate gleets have ſometimes been cured by violent and long continued exerciſe on horſe-back; ſuch as a journey from Edinburgh to London: and it is probable that this cure is produced by exciting an inflammation in the parts, as the injections juſt now recommended are apt to do. Gleets have ſometimes been cured by coition; which may be accounted for on the ſame principles: but this is a remedy which can never be recommended by the honeſt practitioner; becauſe gleets are often infectious, and the venereal diſeaſe would by theſe means certainly be communicated to a healthy woman; or, if ſhe was not healthy, the man would not only run the riſk of getting a freſh gonorrhœa, but even the lues itſelf, if his gleet was owing to an ulcer in the urethra.

Beſides the above-mentioned remedies, ſome others may be applied in gleets of the more obſtinate kind, ſuch as the tinctura cantharidum internally, or injections of oil of turpentine, of infuſion of galls, &c. and I have been informed

by a friend, that he once ſaw a deſperate gleet cured by injecting the tincture of ipecacuanha, and ſome other caſes where a ſmall electrical ſhock through the urethra produced a cure. I can ſay nothing with regard to the effects of theſe remedies, having never had occaſion to try them. I mention them only becauſe we are ſometimes at a loſs for medicines in very obſtinate complaints of this kind.

Bathing in cold water has alſo been recommended in obſtinate gleets, and I have ſeen it ſometimes produce very good effects, but, in two or three caſes, I have ſeen it as certainly increaſe the running. The ſame effect has been alſo obſerved by others. Sea-bathing is very beneficial; as likewiſe waſhing the genital parts with cold water, either by itſelf or mixed with vinegar.

There are three kinds of *internal* remedies made uſe of in gleets; each of which may be uſed, either alone, or combined, as circumſtances may require, with or without the local applications above mentioned. Theſe are,

1. *A courſe of mercurials.* This is always neceſſary where the diſeaſe ariſes from an ulcer of the urethra, eſpecially of a long ſtanding, or where a general infection has taken place. In ſuch caſes, pills made of turpentine and mercury are often very proper.

2. *Balſamics.* Of theſe the moſt commonly uſed is the balſamum copaiba. Of this the patient may take from fifty to one hundred drops in a draught of cold water, once a-day at noon, or twice a-day, evening and morning. Immediately after the balſam, from twenty to fifty drops

drops of elixir vitrioli acidum ſhould be taken, in the ſame quantity of water, to render the former leſs diſagreeable to the ſtomach. Half a drachm of pure turpentine, or a drachm of balſamum traumaticum, often anſwers the purpoſe of the copaiba extremely well. I knew a caſe, where a very large quantity of copaiba balſam was ſwallowed at once by a young man, who was thereby radically cured of a moſt inveterate and obſtinate gleet.

3. *Corroborants.* Among theſe the Peruvian bark in powder, or infuſed in red wine, or, which is ſometimes better, infuſed in lime water, together with or without ſome other powerful aſtringent, will ſometimes prove effectual when all other remedies have failed. After all, however, our utmoſt endeavours to cure an inveterate gleet will ſometimes be in vain; and there have been inſtances where Nature herſelf has effected a cure in time, after the unſucceſsful and tedious exhibition of the moſt powerful remedies.

Obſtinate gleets ſometimes originate, as mentioned above, from a ſingular cauſe of which we have ſome examples in anatomical collections. This is, when two ulcers of the urethra happen to be nearly oppoſite to each other. In this caſe, ſome parts of them will inoſculate with each other, producing a kind of bands acroſs the urethra, with a ſmall ulceration below. Thus not only a moſt obſtinate running, baffling all medicines, is produced; but a difficulty of making water frequently takes place, and an impoſſibility of

making it but in a very ſmall ſtream, or not at all. The only remedy in this caſe, if we have ſome reaſon for ſuſpecting this cauſe, is the chirurgical operation; though in ſome caſes, where the bands are not too ſtrong, they might perhaps be broke, by applying a probe or catheter. Whether or not the following caſe of a very troubleſome and obſtinate gleet belongs to this claſs, I leave my readers to judge.

Some years ago I was conſulted by a nobleman concerning a gleet, with which he had been affected for about ten years, and for which he had conſulted the phyſicians and ſurgeons in ſeveral countries. Sometimes it ſtopped for ſeveral days; then came on again of itſelf, eſpecially after riding on horſeback, or coition. At ſuch times he always felt ſome uneaſineſs, and the next day a little running, which went off, till the ſame cauſe was repeated; which rendered him very uneaſy, eſpecially as he intended to marry. Upon examining the patient, I found the diſorder ſeated down in the urethra, about the place called by anatomiſts the *Caput gallinaginis*. Every internal and external remedy, that I knew of, was applied, without effecting a radical cure. I took the diſeaſe to be a callous ulceration; and, on this ſuppoſition, he wore bougies for eight or ten weeks without the leaſt effect. Being obliged to continue my travels, I left him very little the better for what I had done; at the ſame time adviſing him, as he intended to go to Paris, to conſult there whoever he could expect any benefit from. The reſult, as he afterwards informed

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me by letter, was as follows. "After my arri-
"val at Paris, I conſulted, according to your ad-
"vice, all the medical men of eminence in that
"city, who rendered me more uneaſy about my
"diſorder than I had ever been before, by their
"different opinions of the cauſe, nature, and
"cure of it. Some adviſed me to a new mercu-
"rial courſe; others preſcribed different internal
"and external medicines. I ſhewed them all the
"preſcriptions ſucceſſively tried by you; they
"ſeemed rather aſtoniſhed, that none of them,
"after a fair trial, had ſucceeded. However,
"ſome new injections and internal remedies were
"ordered, rather I think to ſatisfy me for my
"money, than in hopes of doing me any real
"ſervice; indeed I was for three or four months
"entirely in the ſame condition as when I firſt
"came to Paris. But, ſurpriſing it may ſeem
"to you! the laſt perſon whom I conſulted up-
"on recommendation, ſeemed to me the moſt
"ignorant I had applied to: he ſaid he was
"obliged to examine the paſſage of the ure-
"thra with a catheter, in order to aſcertain the
"place, &c. He accordingly applied it; it went
"in as uſual very readily, till it came to the
"ſeat of the diſorder, where it met with the
"ſame obſtacle it had always done, which I had
"before told him of; notwithſtanding this, he
"endeavoured to puſh it further. I told him it
"gave me exceſſive pain: but he preſſed it im-
"prudently on, and it went through; upon
"which ſome blood immediately run out of the
"urethra. This, as it ſeemed, much frightened

"him:

" him: he aſked my pardon, withdrew his inſtru-
" ment, took his fee, and departed; but left me
" much diſſatisfied for employing him. I ex-
" pected I ſhould be worſe the next day, and
" ſuffer much from his unſkilful conduct: but,
" quite the reverſe, I have been free from any
" diſorder theſe two months paſt; I ride on
" horſeback, and enjoy a woman, without find-
" ing any ill effects from them; and therefore
" think myſelf radically cured. The friendſhip
" I owe you, for the trouble you took on my
" account, obliges me to ſtate to you this parti-
" cular caſe, which may be of uſe to you, and
" which you perhaps can better account for than
" thoſe I have ſince conſulted."

Gleets ariſing from deep and large eroſions of the mouths of the ſeminal ducts, or excretories of the proſtate gland, as alſo thoſe which originate from ulcers of the bladder, are very often incurable; or if they do admit of a cure, a particular conſideration of the nature and treatment of ſuch caſes would exceed the limits of this treatiſe.

In all inveterate and obſtinate gleets, which have their ſeat low down in the urethra, we ſhould carefully examine the proſtate gland; for to a diſeaſe of this part they frequently owe their origin. If the gland ſhall be found preternaturally ſwelled and hard after a mercurial courſe, repeated bliſters applied to the perinæum, with large doſes of the inſpiſſated juice of *conium maculatum, Lin.* I have ſeen in ſome inſtances attended with ſucceſs where all other remedies had failed.

Of

Of the treatment of gleets combined with ſtrictures, *viz.* with more or leſs difficulty in making water, I muſt refer to the chapter on *Iſchury*.

Gleets which ariſe either from a weakneſs, relaxation, or ſometimes perhaps from too great an irritability of the ducts above mentioned, are properly called by the name of *Gonorrhœa* (*fluxus ſeminis*). In theſe caſes, a real ſemen is diſcharged, ſometimes without erection, or any ſenſation of pleaſure: and is either continually dripping off, or is evacuated at times by debilitating nocturnal or diurnal pollutions. Sometimes it is diſcharged only on going to ſtool, when the hard fæces, during their paſſage in the rectum, preſs on the ſeminal veſicles and proſtate gland, and thus force the relaxed orifices of their excretory ducts. This diſorder, however, does not ariſe from any venereal infection, and but ſeldom from the abuſe of venery. Its moſt general cauſe is maſtrupation, and therefore comes not within my plan at preſent. It requires a moſt prudent and careful treatment; otherwiſe the patient will fall a victim to that kind of conſumption which we call with, Hippocrates, *Tabes dorſalis*. Whether the diſorder mentioned in the Old Teſtament, was a gonorrhœa of this kind, or of a different nature, I dare not, as I have already obſerved, take upon me to determine.

NOSOLOGICAL TABLE, illuſtrating the two preceding Chapters.

Claſ. *Locales.*
Ord. *Phlogoſes.*
Genus, BLENNORRHAGIA. *Anglis,* Clap: *Germanis,* Tripper: *Gallis,* Chaude-piſſe: *Italis,* Gonorrœa.

Character in Viris. Titillatio præcipue in urethræ parte anteriore ſub frænulo; ſubſequente poſt biduum aut quatriduum, phlogoſi locali, cum ardore et dolore in mingendo; accedente ſtillicidio materiei puriformis ex urethra; corpore cavernoſo urethræ præternaturaliter turgeſcente, plerumque cum erectionibus membri virilis ſolito frequentioribus, dolorificis.

In Fœminis. Titillatio ad orificium vaginæ externum; ſubſequente poſt biduum aut quatriduum dolore, rubore et tumore præternaturali præcipue (ad raphám) prope commiſſuram labiorum vulvæ inferiorem; accedente ardore et dolore ejuſdem partis in mingendo; cum ſtillicidio materiei puriformis ex vulva.

Gonorrhœa,
Gonorrhœa virulenta
Gonorrhœa maligna
Gonorrhœa venerea
Fluor albus venereus, ſ. malignus
Leucorrhœa venerea
} auctorum.

Variat

Variat ratione ſedis.

Blennorrhagia balani, vulgo gonorrhœa ſpuria	*Materia fluente* ex glande.
——— urethralis	ex urethra.
——— veſicalis	e veſica.
——— labialis	e labiis vulvæ.
——— vaginalis	e vagina.
——— uterina	ex utero.
——— naſalis	e naribus.

Species ſunt,

Blennorrhagia ſyphilitica,

α. Simplex.

β. Complicata, ſ. ulceroſa.

γ. A viru ſyphilitico e maſſa depoſito.

Blennorrhagia ab acri externo applicato.

Blennorrhagia a ſtimulo interno applicato.

Blennorrhagia a cancrouteri aut vaginæ.

Blennorrhagia arthritica?

Sequela Blennorrhagiæ eſt,

BLENNORRHŒA. *Anglis*, Gleet: *Germanis*, Nachtripper, weiſſer Fluſs: *Gallis*, Gonorrhée inveterée.

Character. Stillicidium humoris puriformis, aut mucî limpidi, ex urethra in viris, ex orificio vaginæ in fœminis præternaturalis, ſine libidine aut dyſuria.

Gonorrhœa benigna Gonorrhœa inveterata Fluor albus benignus Leucorrhœa	auctorum.

Variat ratione ſedis ut Blennorrhagia.

Species practico notatu neceſſariæ ſunt,

Blennorrhœa ſimplex, a relaxatione vaſorum.

Blennorrhœa complicata:

α cum ulcere.

β. cum ſcirrho proſtatæ.

Sequelæ

Sequelæ Blennorrhagiæ ſyphiliticæ retropulſæ ſunt:

Tumor teſticulorum.
Iſchuria urethralis.
Bubo?
Ophthalmia.
Dyſecœa.
Fluxus puriformis ex oculis.
———————— ex auribus.
———————— e naribus.
Syphilis.

Genus: GONORRHŒA.

Character. Excretio ſeminis aut muci proſtatæ præternaturalis, cum vel ſine erectione et libidine; accedente dolore lumborum et atrophia.

Gonorrhœa
Pollutio nocturna debilitans } auctorum.
Excretio ſeminis involuntaria

Species ſunt:

Gonorrhœa a relaxatione vaſorum.
Gonorrhœa ab ulcere aut eroſione ductuum excretoriorum proſtatæ et veſicularum ſeminalium.
Gonorrhœa a nimia irritabilitate, potiſſimum per manuſtuprationem inducta.

CHAP. IV.

On the Venereal Swelling of the Teſticles.

WHEN a Clap has been treated either by improper medicines, or the patient labouring under it uſes too violent exerciſe, or eſpecially if he catches cold in the part affected, by expoſing it to a ſtream of air, or by waſhing it with cold water, one and ſometimes both teſticles begin to ſwell, often to an enormous ſize, attended with all the ſymptoms of a local inflammation; to which an irritation of the whole maſs, and a violent fever, not unfrequently ſucceed. This diſeaſe is called a *Swelled Teſticle*, and ſometimes, though very improperly, a *Hernia humoralis*.

Previous to the ſwelling, the running of the clap partly or entirely ceaſes; but ſometimes this will only happen, at leaſt to an obſervable degree, a day or two after the ſwelling has actually appeared.

That the ſwelling and ſymptoms of this inflammation are produced, in that caſe, merely by the irritation of the poiſon lodged lower down in the urethra, at the place where the excretory ducts of the ſeminal veſicles open, and not (as was ſuppoſed formerly, for want of anatomical knowledge of the courſe of the lymphatics) from

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an abſorption of the poiſon, and tranſpoſition of the gonorrhœa to the teſticle itſelf, is now generally admitted; and will perhaps be more evident from the obſervations which I ſhall lay down upon the nature and ſeat of this diſorder, and from the method of treatment which I found the moſt ſucceſsful for this complaint.

Hitherto it has been the general opinion, that the teſticle itſelf is always the ſeat of this diſorder. But, upon a more cloſe attention and inquiry, I find, *firſt*, That the teſticle itſelf is never ſwelled, or in the leaſt affected, in the beginning of this complaint; but that the only affected and ſwelled part is the epididymis, which every man may eaſily convince himſelf of by a careful examination. I ſaid, the teſticle is never in the leaſt affected in the beginning, or for the firſt five or ſix days; and if it becomes affected afterwards, it is merely owing to the prepoſterous treatment. *2dly*, I have conſtantly obſerved, that the fever which frequently attends this complaint, eſpecially in irritable conſtitutions, is never a primary diſorder, but only concomitant to, or the conſequence of, this local irritation; and that for this reaſon, by the method mentioned hereafter, it is almoſt generally in the power of the phyſician, if called upon in time, to prevent any fever taking place.

In what manner this ſwelling of the epididymis is produced by the irritation of the venereal poiſon, retropulſed to the lower part of the urethra, I think unneceſſary here to explain: but we ſee clearly, from the cauſe aſſigned, how it happens,

happens, that, after the ſwelling of one teſticle is gone, the other is ſometimes attacked; and that, after a ſuppreſſion of urine from a retropulſed gonorrhœa, is removed, ſometimes a ſwelling of the teſticles ariſes. This is owing to the tranſpoſition or change of place of the poiſon. It will further appear, from the nature of this diſorder, why a man who has been once affected with a ſwelled teſticle is ſo eaſily affected with the ſame diſorder a ſecond time. But in order to eſtabliſh a more rational and effectual method of cure of that complaint, than has been hitherto practiſed, I muſt obſerve, that this ſwelling is owing to the irritation of the poiſon tranſpoſed to a different place in the urethra, and not to the teſticle itſelf; and, ſecondly, that it is not an inflammation of the teſticle, as has been hitherto generally believed, but only a ſwelling of the epididymis. This I have found to be the caſe in all my patients; and ſaw it particularly confirmed in two caſes where a ſwelling of the ſame kind was brought on by the ſimple application of a larger bougie, and cured without any other remedy than by leaving off the uſe of the bougie; which ſhows beſides, that any irritation of the mouths of the excretory ducts of the ſeminal veſicles may bring on this diſeaſe*.

Having mentioned theſe obſervations about the nature and riſe of a complaint which is ſometimes attended with very diſagreeable conſequences, I ſhall firſt lay down ſuch rules as I found by

* There is another ſpecies of this diſorder mentioned by ſome writers,

experience the moſt ſucceſsful to avoid it; and then proceed to the obſervations I made, to cure it when it has taken place.

To avoid a ſwelling of this kind, every thing that is apt to bring on a retropulſion of the clap ought to be carefully avoided. Such are, acrid aſtringent injections, waſhing the penis with cold water, &c. or expoſing it to the cold air, as for example, making water in a ſtreet where a cold wind blows; violent exerciſe of any kind; the prepoſterous uſe of balſamics, internally or externally; repeated purges, or venery; which points attended to carefully, together with the wearing of a bag-truſs, from the beginning of any clap whatever, have effectually ſcreened my patients from this diſorder. Not one of them who complied with the rules juſt mentioned ever was affected with this diſeaſe.

But we generally find our patients not ſo compliable, or we are called in to ſuch, who having

writers, viz. an inflammation of the teſticle, ariſing from ſome of the venereal poiſon being depoſited there from the maſs. This kind of diſeaſe never came under my obſervation, and I therefore can ſay nothing about it. We are alſo told, that a ſwelled teſticle ariſes ſometimes from venereal ulcers of the glans being dried up: but neither do I recollect to have obſerved any caſe of this kind; though I have ſeen a patient, who, two years ago, was affected with a ſwelled teſticle, which being improperly treated, brought on a fiſtula in ano. This was operated, and nearly healed up, when a ſwelling of the teſticle appeared again; for which I was conſulted. I ſucceeded in diſperſing the ſwelling, by bringing on a running from the urethra, and in completing the cure by a courſe of internal remedies.

having been treated without any attention to thoſe rules, are already affected with the ſwelling. Thoſe require our compaſſion, and the immediate application of every means poſſible to relieve them.

The cauſe of the diſorder, as ſaid above, being an irritation of the mouths of the excretory ducts of the ſeminal veſicles, from the venereal poiſon having taken its ſeat at the caput gallinaginis, our endeavours, in order to do ſomething effectually for our patient, muſt be, firſt to allay the irritation, and then to recall the poiſon to its former original ſeat, that is, re-eſtabliſh the running; both which to obtain, I found the following method to be moſt efficacious.

If the pulſe be accelerated, full, and ſtrong, he is to be bleeded immediately; and a good quantity of blood is to be taken from him; regard, however, to be had to his conſtitution, and other circumſtances. If there be no irritation in the ſyſtem, or only a moderate degree of it, bleeding is unneceſſary, (and this will be nearly always the caſe, if we are called in ſoon at the commencement of the diſorder); being convinced, from repeated obſervation, that a fever in this complaint is never an original diſeaſe, but brought on only in conſequence of the irritation of thoſe delicate parts.

To the ſwelling a common poultice of bread and milk, with a little oil, or, according to circumſtances, ſugar of lead, has been recommended by moſt writers: but having ſeen ſo little effect from this application, I have not for many years

paſt made uſe of it. Inſtead of a poultice, I order firſt a glyſter to be applied, to evacuate the fæces, if the patient had not a natural ſtool; and then I adviſe him, if his ſituation will allow of it, to ſit for half an hour in a warm emollient bath. If he cannot have that convenience, I place him in a perforated chair, upon the ſteam of hot water, for the ſame length of time; previouſly ſuſpending his teſticles. From thence he is to be carried to bed, and a dry bag truſs is immediately applied, in order to keep the teſticles conſtantly ſuſpended, as their hanging down produces or contributes to their irritation. A warm poultice may be alſo applied to the penis, in order to bring on the running again; or, in other words, to determine the retropulſed matter from its new ſeat to come back to the old one. But what I found principally to be relied on is, to adminiſter a full doſe of opium, or, according to circumſtances, a glyſter, made of equal quantities of linſeed oil and barley-water, with a full doſe of laudanum, to be injected, and occaſionally repeated. He muſt keep a low diet, drink nothing but barley-water, or an emulſion of almonds.

To this method of treating ſwelled teſticles by opium, which to my knowledge is new, I was led, about ten years ago, by a ſingular circumſtance of a particular friend of mine, which I think unneceſſary to relate; and I have ſince ſeen ſo good and ſpeedy effects from it, that I now conſtantly make uſe of it. I have had many inſtances,

inſtances, where, by theſe means, the ſwelling and pain of the teſticle were removed, and the running brought on, in the ſpace of twenty-four or forty-eight hours; and in thoſe caſes where it had not that effect ſo ſoon, it always greatly relieved the patient, and prevented a fever. In all more obſtinate caſes, I conſtantly obſerve, that the ſymptoms of irritation, and the ſwelling, did never quit the patient till the running of the clap came on again; but the moment this latter took place, the patient found himſelf relieved of the pain of the teſticle, and the ſwelling gradually diſappeared. To aſſiſt Nature in its beneficial efforts, the opium internally, or in an emollient glyſter, is to be repeated every twenty-four hours; the parts to be expoſed twice or three times a-day, for a quarter or half an hour, to the ſteam of hot water or milk; warm poultices to be conſtantly applied to the penis; and the accumulation of fæces in the rectum to be prevented, by a common glyſter, occaſionally repeated. By proceeding thus, we ſhall generally have the ſatisfaction to cure, in a few days, a diſeaſe which, by a different method of treatment, often requires many weeks to get the better of.

According to circumſtances, ſome other more efficacious means to re-eſtabliſh the running the ſooner, if the ſymptoms of the ſwelling ſeem dangerous, might likewiſe be tried, and applied as mentioned above. The re-eſtabliſhed clap ought to be treated afterwards in the common manner; taking great care to give no occaſion to

a new retropulsion, which in such cases easily takes place a second time.

If the swelling has been treated improperly, it frequently happens that one or both testicles grow hard; and the disease is then commonly called a *Schirrous Testicle*. In all those cases I constantly found the epididymis very hard and much swelled. In some, however, probably through the length of time, the testicle itself was likewise evidently affected, accompanied sometimes with a sensation of a painful pressure, but frequently without any pain at all. Mercury given internally, or rubbed in externally into the perinæum and scrotum twice a-day, with the constant application of a warm poultice made of the root of *atropa mandragora, L.* I found, in that case, a useful remedy. The cicuta, applied internally and externally, may be tried. An emetic has been sometimes found effectual. The decoction of the bark of the root of *daphne mezereum, L.* internally, and a poultice of it externally, has lately been very much recommended; but in several patients to whom I have given that decoction, I observed it made them so sick that they found it impossible to bear it on the stomach, even when I made it very weak. *Van Swieten* once told me, that he had given, for an indolent chronic induration of the testicles, lapides cancrorum, an ounce in a pint of good Austrian wine, or old hock, taking three or four table-spoonfuls every morning and evening, with good success. I once tried this remedy, and it answered extremely well. After Van Swieten's death, I met a patient who told

told me, that he had been cured by him of an hard ſwelled teſticle, though not from a venereal cauſe, by the ſame remedy; and that he had been perfectly well ever ſince. It is, however, to be obſerved, that we ſhall ſometimes be diſappointed by all theſe remedies; and that the hard ſwelling, of ſeveral months or years ſtanding, will not go off, except we bring on the running.

A *cancer of the teſticle* requires extirpation; but whenever a teſticle is cancerous, or in its ſtructure diſeaſed, we ought always carefully to examine whether the lymphatics of the ſpermatic cord are not at the ſame time affected; in this caſe, the kidney of the ſame ſide, to which thoſe lymphatic veſſels go, being generally diſeaſed, the exciſion of the teſticle proves an uſeleſs operation, and would only expoſe, by its fatal conſequences, the ſurgeon's reputation.

We are told by ſome writers on this ſubject, that a venereal inflammation of the teſticles frequently terminates in a ſuppuration. This may ſometimes be the caſe; but never happened to any of my patients. I am therefore inclined to believe, that, if it happens, it more frequently proceeds from a bad treatment, than from any other cauſe. But perhaps that ſpecies of venereal teſticles which we are told ariſes from a tainted maſs, (if it ever exiſts), is more apt to end in ſuppuration, than that ariſing from a ſuppreſſed gonorrhœa, which, as we have ſeen above, very ſeldom affects the teſticle itſelf. One particular caſe, which I ſaw eight years ago, though not venereal, deſerves, perhaps, to be men-

tioned here. A young man of twenty years of age, afflicted with ſcrophulous ſwellings about his neck, was adviſed by a phyſician to make uſe of the decoctum lignorum; but following this advice for ſome weeks, he was affected with a cough, which, in a fortnight after, ended in an hæmoptyſis. Though he now left off the decoction, and made uſe of ſeveral other medicines preſcribed to him, the cough continued for many months, accompanied with ſpitting of blood, or mucus ſtreaked with blood occaſionally. Being conſulted, I gave it as my opinion, that his lungs were affected with ſcrophulous tubercles, for which I knew no remedy; and deſired him to conſult the firſt men of the profeſſion in the place; though the remedies ordered by them did not in the leaſt alter his cough, he was in other reſpects tolerably well, eat with appetite, and ſlept with eaſe. One day he came to me, and complained of a painful ſwelling on both ſides of the inguina, but more ſo on one than on the other. Upon examining, I found the ſpermatic cord very much enlarged. I aſked him whether he had made free with the ſex. He declared, upon his honour, he had never lain with a woman in his life, for fear of being poxed; but ſaid he had had the ſame complaint ſeveral times before, and felt it always whenever he was in company with young women, who ſtrongly excited deſire; that it grew ſometimes extremely painful, inſomuch that he avoided ſuch occaſions as much as poſſible. Having been in ſuch a ſituation the day before, the ſame pain came on; but

but had continued ſo much longer than uſual, that it induced him to apply to me for aſſiſtance, I adviſed him to apply cold water to the parts, which cured him of his complaint in a few days. Thus much I thought to premiſe to what follows.

Some months after, he complained to me that one of his teſticles had become very hard without any apparent cauſe. Upon interrogating him about the uſe of women, he repeated the ſame thing he had done before; but confeſſed that he had frequently maſturpated himſelf, without knowing that ſuch a practice could produce any diſorder. I preſcribed hemlock, and all the reſolvents the Materia Medica affords, both internally and externally, but without any effect: the teſticle grew painful, and daily larger; and at laſt burſt, and a ſmall quantity of purulent matter was diſcharged. On my return to town, after an abſence of ſome months, he told me, that during that time a ſmall diſcharge had continued; and that ſeveral fibres like white threads came away from the ulcer every day. Upon examination, I found the whole teſticle reduced to a very ſmall ſize, and the ulcer nearly cloſed up, and in a few weeks it was quite healed. His cough continued during all this time; but he appeared not to be more emaciated than when he firſt applied to me. Every three or four months, when the tickling of the cough ſeemed to increaſe, and he was afraid of a ſpitting of blood, he was bled by his own advice. The ſpermatic cords were quite natural. The ſame month of

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the following year, the other teſticle became affected juſt as the former had been. A ſurgeon of eminence, who had treated the patient with me the preceding year, was called in during my abſence; and though every thing was done for him which in my opinion could have been done, when I returned back to town, the complaint ſtill continued, and had now laſted for ten weeks. At the expiration of the ſeventh week, the teſticle burſt; and now whole pieces of the ſpermatic veſſels of the teſticle were every day diſcharged from the opening; and in three months the teſticle was reduced to the ſame ſize as the other, viz. to that of a ſmall haſel-nut. There was no ſwelling in the ſpermatic cords; and the patient told me, he had ſtrictly followed my advice, and avoided, for theſe two years, his bad cuſtom above mentioned. The cough continued; but by degrees reduced him ſo low, that he died two years after.

The phyſician who attended him laſt informed me, that, on opening the body, he found a vomica in one of his lungs, and many large hard tumours or tubercles on both; but he had not examined the teſticles. From what cauſe the diſeaſe of the teſticles aroſe, whether from a ſcrophulous complaint, or from maſturpation, I do not pretend to aſcertain; but I relate the caſe only as a very particular and remarkable one, which ſhows, that there may ſometimes happen a ſuppuration of the teſticles even with the greateſt care and moſt judicious treatment.

CHAP.

CHAP. V.

Of the Inflammation and Induration of the PROSTATE GLAND.

I HAVE nothing in particular to ſay on the inflammation of the proſtate gland, except when it ariſes from a ſuppreſſed gonorrhœa. In that caſe, we ſhould uſe every means poſſible to reſtore the gonorrhœa, particularly thoſe recommended for ſwelled teſticles ariſing from the ſame cauſe; becauſe, if this inflammation terminates in ſuppuration, whether the abſceſs breaks into the urethra, bladder, inteſtinum rectum, or perinæum, it will always be attended with very diſagreeable conſequences. The ſymptoms of an inflammation or ſwelling of this gland are known from the pain and difficulty of making water; beſides, if we ſhould be doubtful whence they proceed, the finger will clearly tell us. If a ſuppuration has already taken place, we have only to obſerve, that mercury internally and externally will be neceſſary, and afterwards proper injections, the compoſitions of which are not particular, and muſt entirely be left to the judgment of the practitioner.

In the induration or ſcirrhoſity of this gland, the remedies recommended for indurated teſticles or buboes will be ſerviceable; but eſpecially bliſters,

ſters, applied repeatedly to the perinæum, and internally the hemlock in large doſes.

If a total ſuppreſſion of urine is to be dreaded from the ſcirrhous ſwelling of the proſtate, as is always ſooner or later the caſe, every means poſſible ought to be tried to bring on a ſuppuration of the gland, in order to prevent ſtill more diſagreeable conſequences.

CHAP.

CHAP. VI.

On the VENEREAL ISCHURY *and* STRICTURES.

A TOTAL ſuppreſſion of urine, occaſioned either by the remains of a former ſyphilitic complaint, or of a preſent venereal virus affecting the urethra, or neck of the bladder, we call a *Venereal Iſchury;* and a partial ſuppreſſion, or a difficulty of making water in a continued and natural ſtream, attended with pain, and a frequent deſire to make water, ariſing from the ſame cauſe, is commonly, though not always properly, called a *Stricture.*

When I ſay, that the name *Stricture,* which has been given to the latter complaint, is often a very improper one, it is becauſe a partial ſuppreſſion of urine, as well as a total one, may ariſe from different cauſes, among which a ſtricture or conſtriction of one peculiar part of the urethra is only a common one.

The different cauſes by which either a partial or total venereal ſuppreſſion of urine is produced, are, 1*ſt*, An inflammation or ſpaſmodic contraction of the neck of the bladder, from a recent venereal gonorrhœa repelled. 2*dly*, A chronic conſtriction or narrowneſs of one particular part of the urethra, from a thickened and hardened portion of its ſubſtance, properly called a Stricture.

ture. 3*dly*, A compreſſion of the neck of the bladder or urethra, producing a partial or total abolition of its cavity, by a preternatural ſwelling of the proſtate or of any other gland of the urethra. 4*thly*, A prominent cicatrix of a preceding ulcer, or a fungous excreſcence in ſome part of the urethra, commonly known by the name *Caruncle*.

As upon the perfect knowledge of theſe cauſes the radical cure of the diſeaſe entirely depends, we ſhall conſider them more minutely.

Whenever the running of a venereal gonorrhœa is ſtopped by any cauſe whatever, the virus ſeems to go lower down into the urethra, and to excite there a ſimilar irritation and inflammation, as it did in its former place. If it fixes its place at the caput gallinaginis, and irritates the mouths of the excretory ducts of the ſeminal veſicles, it produces, as we have obſerved in the foregoing chapter, a ſwelling of the epididymis, or what is commonly called a *ſwelled teſticle*. If it goes ſtill lower down the urethra, and ſettles at the neck of the bladder, it will, in theſe circumſtances, not produce a ſwelled teſticle, but an irritation, ſpaſmodic contraction, or inflammation of the neck of the bladder, with a total or partial ſuppreſſion of urine. The poiſon in that caſe, if the complaint be properly treated, will produce no other diſeaſe than a ſuppreſſion of urine for a few days only: after which it will leave that place; and, on going more forwards into the urethra, bring on either a ſwelled teſticle, or, if it returns to the ſame place

which

which it originally occupied, reproduce the running, with the common ſymptoms of a clap, and ſo by degrees at laſt entirely go off, without leaving any bad ſymptom behind it. But this ſo much wiſhed for circumſtance does not always happen: the poiſon lodged in the neck of the bladder will ſometimes produce, beſides a variety of very diſagreeable ſymptoms, an ulceration in that place, or in ſome other part of the urethra. Though the diſcharge ariſing from ſuch an ulcer be, by degrees, partly or entirely ſtopped, and the ulcer itſelf healed, we often obſerve either a coarctation of the urethra remaining at the place where the ulcer was; or the cicatrix of the ulcer forming a kind of knot or protuberance into the paſſage. Sometimes alſo the ulcers, on healing, will form large granulations, or preternatural excreſcences, which afterwards produce the ſame effect as a prominent cicatrix, under the name of *Caruncles;* or the proſtate gland, or any of the glands of the urethra itſelf, ulcerated, form a fungous excreſcence, protruding into the urethra, or neck of the bladder, and thereby produce an anguſtation, or a total abolition of the cavity of the paſſage. Anatomical diſſections have alſo taught us lately, that two ulcers of the urethra in oppoſite directions, or a ſingle but large one, will ſometimes partly grow together by bands croſſing the cavity of the urethra; and whilſt the lower part of the ulceration remains open, and continues the diſcharge mentioned in the chapter on *Gleets*, the upper parts grown together

gether diminiſh or aboliſh the cavity of the urethra, and thereby prevent the free paſſage of urine.

In ſome of theſe caſes the patient, eſpecially by living ſober and quiet, is able to make water pretty freely, but wants a long time in doing it. But, on committing the leaſt exceſs in eating and drinking, or by taking too much exerciſe, the diſeaſe grows evidently worſe, the urine comes from him either in drops only, or runs in a ſmall and interrupted ſtream, exciting great pain and uneaſineſs; or the paſſage is entirely ſtopped, and thus endangers his life. The urine, in theſe caſes, ſometimes, as I have ſeen, forces its way into the rectum, and is evacuated by the anus; or it produces in the urethra, behind the coarctation, a dilatation, eroſion, ſinuſes, or a fiſtula, through which it is afterwards conſtantly diſcharged.

The further back in the urethra this diſeaſe has its ſeat, the more difficult, will be, in general, its cure, and the more danger awaits the patient. The more inveterate or complicated all theſe ſpecies of the diſorder are, the more difficult is their removal. Thoſe ariſing from a callous or contracted ulcer of the urethra, are more eaſily cured than thoſe ariſing from a protuberant cicatrix or from caruncles. That kind of iſchury which owes its origin to a retropulſion of a recent clap, I have obſerved eaſier and ſooner to be removed than all others; that ariſing from a ſcirrhous proſtate is ſometimes, but not always, incurable; but for an iſchury ariſing from a fungous

gous excreſcence in the urethra, I know of no remedy.

Method of Treatment.

The firſt thing, if we are called in to a patient affected with a venereal ſuppreſſion of urine, is, to inquire or ſearch for the cauſe of the diſorder, whether it ariſes from a retropulſion of a recent gonorrhœa, or from old complaints within the urethra. Our chief aim, in both caſes, being to remove the iſchury, we ought to examine, *1ſt*, Whether the diſeaſe is ſtill merely local, or whether there is a general irritation of the ſyſtem. If the patient has a quick and hard pulſe, bleeding is neceſſary. The quantity of blood to be taken is regulated by the ſtate of the pulſe and conſtitution of the patient. A man of a ſtrong habit, or of a plethoric conſtitution, will bear the loſs of a pound; whereas half that quantity taken, will operate ſufficiently, and have the ſame effect, upon a delicate and more tender habit. It ought, however, to be obſerved, that, in ſuch caſes, the patient will reap more benefit from one copious bleeding, than from two or three ſmall ones ſucceſſively made one after the other. This being done, or when the ſyſtem is not affected, the bladder, if much diſtended, ought to be evacuated, and the catheter applied for that purpoſe. Its application, however, in thoſe circumſtances, is ſometimes very difficult, nay, even impoſſible. This is certainly often owing to the cauſe of the

diſorder; but much depends upon ſkilful management of the ſurgeon.

In order to facilitate the introduction of the catheter, (after the patient has been bled, which, if neceſſary, ſhould always precede), I have experienced the following management to be uſeful. The catheter being anointed with ſweet oil, is to be introduced gently. As ſoon as we meet with any obſtacle, care ought to be taken not to force it, but to wait a little, and then try to puſh it on again gently; becauſe this obſtacle ſeems ſometimes to ariſe ſolely from a momentaneous ſpaſm of the urethra, excited by the mechanical irritation of the catheter itſelf, which, if we diſcontinue puſhing, frequently goes off in a few minutes, and the catheter is then eaſily introduced further; whereas if we go on puſhing, in that caſe the ſpaſm grows more violent, and renders the introduction often utterly impoſſible. It is owing, probably, to this ſpaſm that we ſee ſometimes that one ſurgeon is able to introduce it, while another, though by no means of inferior ſkill and capacity, had before tried it in vain. If the obſtacle be at the caput gallinaginis, or higher up, we may very often remove it by introducing a finger in the anus, and thus aſſiſting the catheter. I have ſeen inſtances where the introduction of the catheter proved impoſſible as long as the patient was lying in bed; whereas it went in very readily on the patient's ſitting on the edge of the bedſtead, his feet hanging down. I have alſo obſerved where a large catheter was eaſily introduced, after a ſmaller one had been repeatedly tried without

without ſucceſs.—I have been perhaps too full in enumerating all theſe circumſtances: but I am confident, that, by a careful attention to one or the other of theſe points, we may not only often ſpare our patients a great deal of pain, but, what is perhaps more material, prevent a lues taking place; which eaſily happens when, by a rude treatment, the urethra has been wounded. I have certainly ſeen the moſt evident venereal ſymptoms ariſe in the habit from ſuch a cauſe, where the patient had no other complaint before but an iſchury from a ſimple retropulſed clap. If the coarctation of the urethra be ſo great as to refuſe, even under the juſt-mentioned precautions, any catheter whatſoever, an application of a ſmall catgut will ſometimes ſucceed, and prove highly beneficial. If the danger is not ſo great, viz. the bladder not very much diſtended, and conſequently the *immediate* diſcharge of urine not ſo preſſing, and the introduction of the catheter proves very difficult, ſome other means to procure a diſcharge of urine ought to be applied; of which I have found the following the moſt efficacious and uſeful. A common glyſter, mixed with ſome honey or lenitive electuary, ſhould be adminiſtered, in order to evacuate the fæces, and thereby to prevent the conſtant ſtimulus which their accumulation is apt to excite. As ſoon as the fæces are evacuated, a glyſter of equal quantities of barley-water and linſeed oil, with a full doſe of the tinctura Thebaica, ſhould be adminiſtered, and occaſionally repeated. Every kind of medicine or food apt to go through the

urinary paſſages, ſhould be carefully avoided; and, for the ſame reaſon, the patient ſhould not drink even more of barley-water, or of the ſolution of gum arabic, than is neceſſary to quench his thirſt. He ſhould likewiſe, according to circumſtances, be put in a warm bath, tempered with milk or decoction of bran, for half an hour or an hour, and the ſame be repeated four or five hours after; or, what I have found often very ſerviceable, he ſhould ſit upon a perforated chair, and expoſe his private parts to the ſteam of hot water mixed with vinegar. If he be reſtleſs and feveriſh, bleeding will ſometimes be proper, and after it a full doſe of laudanum ſhould be adminiſtered to him in the evening. The judicious application of theſe remedies will ſometimes anſwer in the moſt deſperate circumſtances.

I ſaw once, in a ſuppreſſion of urine, where there was no catheter at hand, that a roaſted onion, applied to the perinæum, by the advice of an old woman, had the effect, ſo that two hours after the application, the urine flowed plentifully: and, in another caſe, the life of an eminent phyſician in the army was ſaved by covering the glans penis with the freſh pellicle of an egg found between the ſhell and albumen. As ſoon as the pellicle, growing dry, began to contract, the urine began to flow plentifully; but on applying it the ſecond time, two days after, when the ſuppreſſion of urine unexpectedly returned, it proved, as the perſon who recommended it foretold us, inefficacious, and the patient died. Perhaps the volatile liniment, or a bliſter, applied to the

the perinæum, would produce the ſame effect, with more certainty, and quicker, than the remedies did in the two caſes related.

If we have been ſo happy as to evacuate the bladder either by the application of the catheter, or by ſuch other means as have been now mentioned, our next care will be, to prevent a freſh accumulation of urine, and to remove as ſoon as poſſible the cauſe of the ſuppreſſion. The firſt will be effected by continuing the ſame remedies, and eſpecially (as has been recommended by ſome writers) by leaving the catheter within the urethra. This, however, none of the patients, whom I have hitherto treated, were able to comply with. They ſuffered ſo much from keeping the common catheters applied, whether made of ſilver or ſteel, flexible or inflexible, as made them conceive, that the pain which would ariſe from a repeated application of the catheter, or from a freſh accumulation of urine in the bladder, could not poſſibly be greater; and therefore withdrew the catheter, tho' they were very deſirous to have retained it if they had found it poſſible. To guard againſt this inconvenience, I could never find out a remedy, till I tried the catheters invented by Mr. Theden, firſt ſurgeon in the army of the king of Pruſſia. They are made of a golden wire covered with caoutchouc or elaſtic reſin: their application is not only, in many inſtances, eaſier than that of the common catheters, or of hollow bougies of any kind; but alſo, in all inſtances in which I tried them, I found the patients could keep them applied, after the urine was diſcharged, with much leſs inconvenience.

venience. They are therefore, in thoſe caſes, much preferable to any other. But if we have none of theſe catheters at hand, which muſt be the caſe as long as they are ſo difficult to be got, and ſo high in price*, we muſt liſten to the patient's ſufferings, withdraw the catheter as ſoon as it becomes too troubleſome, and have recourſe immediately to ſuch remedies as will tend to prevent the return of the ſuppreſſion.

To ſuch as are in poſſeſſion of any of thoſe elaſtic catheters, the following rules, to be obſerved in their application, may perhaps be acceptable.

The elaſtic catheter, after being anointed with ſweet oil, is introduced in the common manner. The ſurgeon, as uſual, gently draws with one hand the urethra towards him, and holding the catheter with the fingers of the other, always at a diſtance of an inch or two from the glans, gradually introduces it; whilſt this is performing, the catheter generally enters the bladder, without any particular direction from the hand of the operator. If any reſiſtance be found, the rules mentioned above are to be obſerved, to facilitate the introduction; but if the reſiſtance be at the neck of the bladder, there is nothing more to be done, than gently puſhing the inſtrument forward, at the ſame time turning it from the right to the left; for by turning it in the oppoſite direction, the ſpiral windings of the gold-wire of Mr Theden's catheter would be ſeparated. If the ſurgeon

* Both theſe inconveniencies are now greatly removed by the catheters made of the ſame ſubſtance, by Mr Bernard at Paris.

ſurgeon finds the obſtacle greater, he ſhould, as I ſaid above, ſtop the introduction till the contraction or ſpaſm of the ſphincter veſicæ, and the reſiſtance, ceaſes, which happens for the moſt part in a very ſhort time, when he is enabled to go through the paſſage eaſily. This catheter is introduced, like a common one, according to circumſtances with or without a probe. After remaining in the urethra for ſome time, on being extracted, it is generally very ſoft, and therefore unfit for being uſed again until it has been cleanſed and dried, and put for a little time in a cold place; which operation reſtores it to its former firm texture. The method of cleanſing it is, to waſh the outſide with water, and likewiſe the cavity with the ſame applied by rinſing. For cleanſing and drying its inſide, a long needle with a ſilk thread will be moſt fit. When about to be uſed, and found to be too ſtiff, it may be ſoftened by keeping it a little in the hand, or holding it near the fire.

But if all our endeavours to introduce any catheter or catgut have proved unſucceſsful, and the danger of a rupture of the bladder, from its diſtention, be imminent, the urine muſt be at all events diſcharged. This ſhould, therefore, not be deferred too long; and may be done, according to the ſeat of the diſorder, either by an inciſion into the urethra behind the ſtricture, or ſeat of the ſtoppage; or if that ſeat be in the neck of the bladder, and the inciſion and introduction of the trocar in that place perhaps be found too difficult for the ſurgeon, the bladder may be

tapped through the anus, or an inciſion made above the ſymphyſis pubis, and the bladder be tapped in this place, under the peritonæum; which is not a very difficult nor painful operation, and becomes neceſſary to ſave the life of the patient.

Theſe are the means generally uſeful to give relief to the patient, in all caſes of *iſchuria urethralis*.

But, to cure that diſorder radically, its cauſe, as I ſaid, ought to be removed; which is effected, according to its nature, by different methods.

If the iſchury proceeds from a recent repulſion of a venereal gonorrhœa, the running muſt be brought on, and the clap recalled. For this purpoſe, beſides the general remedies before mentioned, the ſteam of hot water, alone or mixed with vinegar, the volatile liniment, &c. applied to the perinæum, I have ſeen and experienced many times to be the moſt efficacious remedies to remove the venereal poiſon from the neck of the bladder, and bring on the running afreſh. I recommend the ſuſpenſion of the teſticles during the application of the ſteam; becauſe I have ſeen inſtances where the poiſon, leaving the neck of the bladder, inſtead of returning to its original ſeat under the frænum, has ſettled at the caput gallinaginis, and thereby excited a ſwelling of the teſticle; which I have never obſerved ſince I took the above precaution. In the mean time, the patient ſhould keep quietly in bed, and warm poultices ſhould be conſtantly applied to the genital parts, and the accumulation of the fæces

fæces be carefully avoided by glyſters. Emetics are, occaſionally, as uſeful in this caſe as they are in ſwelled teſticles; and the internal uſe of opiates produces, in many inſtances, a ſpeedy effect. As ſoon as the venereal poiſon, on leaving the neck of the bladder, occupies again its original place, the running is re-eſtabliſhed, and then to be cured as gonorrhœas in general are; only the patient ought to take the greateſt care to avoid all the cauſes which are apt to bring on a ſimilar retropulſion; as we ſee daily, that ſuch a retropulſion, once taken place, is eaſily brought on a ſecond time, and ſometimes by the ſlighteſt occaſion.

I muſt, moreover, obſerve, that in ſuch a caſe, after the iſchury is removed, I always found the internal uſe of mercury neceſſary for a radical cure; having ſeen ſeveral inſtances where the abſorption of the virus took-place during the ſuppreſſion, and excited afterwards evident ſymptoms of its preſence in the maſs, though the local complaint of the genitals was perfectly cured.

If the ſuppreſſion ariſes from a chronic complaint of the urethra, ſuch as from a ſtricture accompanied with an ulcer of the urethra, or an eroſion of the excretory ducts of the proſtate gland or the ſeminal veſicles, this cauſe muſt be removed according to the rules laid down under the article *Gleets* and *Venereal Ulcers*.

If the ſtricture ariſes from a ſimple conſtriction of one particular place of the urethra, without any ulceration, our endeavours muſt be to dilate this coarctation; which owes its origin either to

an ulcer healed up, by which the whole circumference of the urethra is leſſened; or to a prominent cicatrix or calloſity, occaſioned by a previous ulcer. This is moſt effectually obtained by a long-continued uſe of bougies, beginning with the ſmaller ones, and ſo going on gradually until the patient is able to bear thoſe of the largeſt ſize. This bougie he is to keep, in the beginning, for a quarter or half an hour, and afterwards, if he can bear it, for ſeveral hours, morning and evening. If a bougie of elaſtic reſin be at hand, this precaution is hardly ever neceſſary, as they, growing ſoft and fleſh-like in the urethra, produce little or no uneaſineſs. But as this kind of coarctation or ſtricture is ſometimes ſo very ſmall that it does not even admit the ſmalleſt bougie, the application of a ſmall catgut is an excellent invention. The catgut once introduced, and left for ſome time in the urethra, begins to ſwell, by which the coarctated paſſage inſenſibly enlarges; ſo that, upon withdrawing it the firſt time, the patient is ſometimes able to make water with unexpected eaſe; and the next time a larger may be eaſily introduced, and have the ſame good effect.—If by theſe means we have by degrees dilated the urethra ſo far as to admit the largeſt catgut, a bougie may be introduced; the uſe of which is to be continued for ſeveral weeks after he is perfectly cured and able to make water in one large continued natural ſtream.

If the coarctation does not even admit of a catgut, and the ſeat of the diſorder is at a place which we can come at, an inciſion into the urethra behind

behind the coarctation is, as I have ſaid above, the moſt adviſeable: by theſe means the urine will be diſcharged through the inciſion, whenever neceſſary, and the return of the ſuppreſſion thereby effectually prevented. We may afterwards eaſily dilate the wound, paſſing the knife through the coarctation; and then introduce a bougie, which the patient is to wear until the ſtricture is removed and the whole healed up, and thus the complaint radically cured. The ſame method will be alſo ſometimes neceſſary if the urine accumulated behind the coarctation has forced its way either through the inteſtinum rectum, in which caſe the patient will void his urine with the fæces through the anus, or by a fiſtulous opening through the perinæum. But, in theſe caſes, it will be in general neceſſary to let him go through a courſe of mercurials before we proceed to the operation of the fiſtula; otherwiſe we ſhall find ourſelves very often diſappointed in curing this latter: if he has not ſtrength enough to undergo ſuch a courſe, as is frequently the caſe, he his to be prepared by a proper diet and medicine. On performing this latter operation, an inciſion muſt alſo be made through the ſtricture, the original cauſe and ſeat of the diſorder; and the patient is to wear a bougie during the cure, and for ſome time afterwards, as in the caſe juſt before mentioned.

If the iſchury ariſes from excreſcences or caruncles, as they are commonly called, it has been adviſed, by one of our moſt ingenious ſurgeons in London, to introduce a covered cauſtic

into

into the urethra to the caruncle, and apply it thereto. To perform this properly, an inſtrument has been invented: but whether this application is attended with ſafety and ſucceſs in practice, I have as yet had no opportunity to aſcertain.—The inciſion of the urethra at the place where the ſeat of the diſorder lies, and the cutting out of thoſe extraneous bodies, has been propoſed by others. But I have never yet heard of any caſe where this operation had been performed.

If a ſcirrhoſity or hard ſwelling of the proſtate, or a fungous excreſcence of the ſame gland, all the remedies recommended for reſolving ſuch a ſwelling ought to be tried; and if they fail, we ſhould endeavour to bring the gland rather to a ſuppuration, than to let a diſorder increaſe which ſo frequently proves fatal.

If a ſwelling of any of the ſmaller glands of the urethra ſhould prove the cauſe of the iſchury, and the moſt powerful reſolvents ſhould prove ineffectual, I would adviſe my patient rather to have the extirpation of the tumour performed, than to live in the conſtant anxiety about the dreadful conſequences from this complaint.

CHAP.

CHAP. VII.

On VENEREAL ULCERS.

AN ulcer arising in any part of the body from a venereal cause is called a *venereal ulcer*, or commonly a *shanker* (or *chancre*); a name adapted, probably, to express its corroding nature.

Venereal ulcers owe their origin either to a *primary* or to a *secondary infection*; viz. to the venereal virus originally applied, or deposited from a tainted mass on the surface of the body. Both kinds may arise on any part of the body; but they appear more frequently upon parts which are not covered with the cuticle; such as the glans penis, the inside of the prepuce, the urethra, the labia pudendi, nymphæ, lips, mouth, nipples, &c. Of internal venereal ulcers we have not yet, as far as I know, any authentic observation.

Though venereal ulcers, as I have just now observed, do generally and most frequently appear only on parts which are not covered with the cuticle, especially in the glans, prepuce, mouth, &c. yet we meet not unfrequently with cases where they affect parts covered with the cuticle; as the penis, scrotum, thigh, &c. There are likewise instances where surgeons performing some operations, or persons assisting in the delivery of women, have had the misfortune of being affected with venereal ulcers in their hands

or

or arms. In all cases of this latter kind, the poison seemed to me universally to operate more powerfully than when originally applied to the parts not covered with the cuticle, or when deposited from a tainted mass. I know a midwife, who, having been infected in this manner several years ago, still suffers from the disease, and we have another instance in this metropolis, of an eminent male practitioner in the same art, who, by delivering an infected woman, got ulcers in his hand, and at this present time still labours under the consequences, though it is now three years since he received the infection. I know a gentleman who, wounding his finger by accident with a penknife, exposed it the same evening to infection, without suspecting any bad consequences: the wound changed in two days to a very bad venereal ulcer, accompanied with a painful and obstinate swelling of the whole arm together with a bubo under the arm-pit, and symptoms of a general infection.

Though I have with the greatest care attended to all the cases of this kind which fell under my observation, I could not discover, in the constitutions of the patients, any particular cause of such violent symptoms. In two instances, the patient before and afterwards had venereal ulcers in places not covered with the cuticle, and the poison there produced the common symptoms only. It seems therefore probable to me, that, in order to excite primary venereal ulcers upon a place covered with the cuticle, the virus must either

ther be extremely acrid in its nature, or produce more violent effects on account of its being applied to parts which have no mucus to dilute it, or to defend themselves from its acrimony. We at least very seldom observe such violent and obstinate effects in primary venereal ulcers upon parts not covered with the cuticle, or in secondary ones arising upon any part of the surface of the body. This is owing most probably, in the former case, to the poison meeting with a quantity of mucus to dilute it, and in the latter to its having been diluted, or having undergone some change by its previous mixture with the mass.

Venereal ulcers though arising from a primary infection, are either *local* or *universal;* viz. the venereal virus having been applied to the part, and, by its stimulus, produced an irritation and subsequent erosion, is confined still to that part only; or it has been already absorbed into the mass, and thereby infects the whole body. This distinction is useful and necessary in practice; ulcers of the latter kind, like those arising from a secondary infection, never being curable without a course of medicines which purify the mass from the venereal infection; whereas the former may be cured by mere local applications.

But here I must take notice of another distinction which is of the greatest importance in practice, and to which writers on this subject seem hitherto not to have paid due attention. Ulcers arising on the genitals are, now-a-days, sometimes after the slightest examination, generally

nerally pronounced to be venereal, and treated as ſuch: yet it is certain, and daily experience ſhows, that ulcers, both of the fauces and genitals, may, in our days as well as the days of *Celſus*, ariſe from acrimonies or miaſmata which have nothing in common with the venereal virus. However, by not attending properly to this point, I have not only ſeen the honour of innocent perſons brought into queſtion, but patients by an improper treatment, reduced to a miſerable ſituation.

But the more dreadful conſequences I have obſerved, when ulcers of the mouth and fauces, occaſioned by the uſe of mercury itſelf, eſpecially under a ſalivation, are miſtaken; or when ulcers are confounded with venereal ones, which at firſt really owed their origin to the venereal virus, but during a mercurial courſe aſſume a different appearance, and ſeem to have entirely changed their venereal nature: inſtead of healing, to which point they ſeemed to approach, they now prove not only obſtinate, but, yielding a thin ichorous diſcharge, grow worſe under the continuation of the ſame remedy, and ſpread further and further.——To ſhow the importance of theſe diſtinctions more evidently, I ſhall ſubjoin an account of a few caſes relating to that ſubject; but ſpeak more eſpecially about their nature below, under the head of *Venereal Complaints incurable by Mercury*.

A gentleman twenty-one years of age, of a ſtrong plethoric conſtitution, conſulted me ſome time

time ago about a ſhancre, as he called it, of the glans penis, with which he had been afflicted for eight or nine months. He had conſulted at the time he got it, an eminent ſurgeon at Dublin, who preſcribed a courſe of mercurials. He was ſalivated; but the ulcer not healing, mercurial fumigations were applied for ſome time to the part affected; by which the ulcer ſeemed to grow leſs, and of a better appearance, but did not heal. He was therefore adviſed to a ſecond mercurial courſe, with different preparations of mercury internally and externally; but, under this courſe, the ulcer grew larger, deeper, and in every reſpect worſe. In that condition he came to London, and conſulted me. Upon examining his caſe, I found a large deep ulcer of the glans, with hard and prominent borders, extremely ſenſible upon the leaſt touch: its baſis appeared reddiſh and pretty clean; but the diſcharge ſeemed to be of an acrid corroſive nature, by which, indeed, half the glans was already conſumed. I told him that I had ſeen ſeveral ulcers of this kind before; that it was not of a venereal nature; and that mercury, according to my obſervation, was, in that kind of ulcers, no fit remedy: that I could cure him, but that it would require at leaſt two or three months time; upon which he left me, promiſing he would call the next day and put himſelf under my care: he did not, and I heard no more of him till four months after, when he ſent for me. His complexion was lively and freſh when I ſaw him firſt; but was now of ſuch a ſickly and cachectic appearance, that I hardly knew him.

His ſtory was as follows: That, having been diſſatisfied with my firſt opinion upon his caſe, and with the advice I gave him, he, at the deſire of a friend, had thought proper to conſult another perſon: That, after a cloſe examination, this perſon had pronounced his ulcer venereal, and had aſſured him that nothing but mercury could cure him; that he had not taken enough of mercury, nor the preparation which was deemed beſt in thoſe caſes; and that, far from two or three months being required for curing him, his preſcriptions would effect a radical cure in three or four weeks time: That, upon theſe aſſurances, he had immediately ſubmitted to a new mercurial courſe, which had brought on a gentle ſalivation; but with ſo little effect, that though the ulcer ſeemed to grow remarkably better during the firſt three or four weeks, it afterwards, inſtead of healing, had corroded the reſt of the glans with part of the urethra. Upon which another ſurgeon was called in conſultation, who adviſing the amputation of the part affected, and the former refuſing to perform it, he had reſolved to drop their further advice, and to hear mine once more. I found the part very much ſwelled, the prepuce affected with a perfect phymoſis, and the urine diſcharging through three or four different holes. I adviſed him therefore to have the prepuce cut, in order to ſee the ſtate of the ulceration, to clean the ulcer, or to apply ſuch medicines as ſhould be thought proper. Internally I preſcribed him ſome ſtrengthening medicines. He uſed theſe for eight or ten days: but the operation

ration he put off from day to day; when he was adviſed by one of his friends to conſult another phyſician, who, by means of a decoction of hemlock and ginſeng root, promiſed to do ſomething more for him than hitherto had been done. This decoction he took for a ſhort time with very little effect, the eroſion going on further and further. At laſt another phyſician was conſulted, who inſiſted upon a ſtrengthening courſe of medicines, nouriſhing diet, the enjoyment of country air, and bathing in the ſea; by which means he is now re-eſtabliſhed with the loſs of half his penis; which, had he followed my advice from the beginning, would have been nearly wholly preſerved.

I make the following obſervations upon this caſe. *Firſt*, That I think it extremely improper to adminiſter a courſe of mercurials for a local venereal ulcer; which was the caſe with this gentleman when he firſt applied to the ſurgeon at Dublin: That a ſecond courſe and ſalivation with mercurial fumigations were ſtill more improper: That adviſing him a third courſe of mercurials, after the two former were found uſeleſs, was not only very injudicious, but extremely hurtful, as it rendered him unable for propagation, to the great ſorrow of his family: That the advice given by the laſt phyſician to uſe ſome ſtrengthening medicines, with a nouriſhing diet, to go to the country, and to bathe in the ſea, was a judicious and honeſt one: and that the patient, who was only brought to follow this latter advice by the ſenſe of his ſufferings, would have been

free of all this misery, had he followed my advice in the beginning.

I was consulted in another case, where ulcers of the throat arising during a mercurial course, being taken for venereal ones, and treated accordingly, by the continued internal use of mercury, became so bad, that both the tonsils, together with the velum pendulum, were almost entirely consumed, and the patient reduced to a most miserable situation, when only by leaving off the mercury, and by the administration of a quite different course of medicines, he recovered. And Mr *Brambilla* gives us an account of a patient, who under a course of mercury being affected with ulcers of the fauces, which having been mistaken by the surgeon for venereal ones, not only lost his velum by the continued use of mercury; but had a caries maxillæ brought on, which proved fatal to the patient. The same author likewise observes, that inflammatory tumours or ulcers growing gangrenous, are by the internal or external use of mercury constantly rendered worse, though they evidently owed their origin to a venereal cause. I myself have seen many instances, where patients affected with venereal ulcers, united with a scorbutic habit of body, by the imprudent use of mercury, not only were reduced to a most wretched condition, but even to death. Mr *Fabre*, in the Supplement to his Observations on the Venereal Disease, relates likewise several cases, where ulcers, though evidently arising from a venereal cause, by a long continued use of internal and external mercurials, and even repeated salivations,

livations, not only remained without cure, but were brought to a ſtate, which afterwards yielding to no other medicines whatever, proved fatal. Whence I think it will evidently appear, that, in practice, we ought to beſtow the greateſt attention in diſtinguiſhing,

1*ſt*, *Local venereal ulcers from univerſal ones*; viz. from thoſe united with, or ariſing from, a tainted maſs.

2*dly*, *Simple univerſal venereal ulcers, from complicated ones*; viz. ſuch as are united with ſymptoms of ſcorbutus, ſcrophula, &c.

3*dly*, *Ulcers of the genitals, mouth, fauces, &c.* ariſing originally from other cauſes; for example, brought on by the acrimony of the ſaliva during the internal uſe of mercurials, or mercurial fumigations from real venereal ones. But, principally,

4*thly*, *Ulcers of the mouth, noſe, genitals, groins, &c.* which, though ſeemingly or evidently brought on by a venereal cauſe, have now, as it were, changed their nature, at leaſt ſo far, that mercury has no further good effect upon them, but rather the contrary.

The characters, by which thoſe different kinds of ulcers may be diſtinguiſhed, are not eaſily deſcribed; inſpection and practical knowledge muſt be our beſt guide. An attention to the following points, however, may aſſiſt us in forming a judgment.

Venereal ulcers are, in general, pretty eaſily diſtinguiſhed by their hard margin or borders, by the lardaceous cruſt with which their baſis is

covered, and by the preternatural redneſs of the ſkin all round the ulceration; which will be rendered more probable if the patient is conſcious that he has previouſly expoſed himſelf to the infection. As there may, however, ariſe ulcers in the genitals, of a different, or ſometimes, perhaps, of a nearly ſimilar appearance, from other cauſes, as has been long ago taken notice of by the moſt ancient medical writers, and confirmed in ſeveral inſtances by my own obſervation, we ſhould be cautious and never form a raſh judgment about the nature of ſuch ulcers, nor pronounce them venereal before we are perfectly aſſured of it. By following a contrary method, we may not only hurt the reputation of an honeſt perſon, and diſturb friendſhip, and ſometimes matrimonial happineſs, as I formerly mentioned with reſpect to gonorrhœas; but do material harm to the patient, by adminiſtering improper medicines. Ulcers which are not of a venereal nature, may be diſtinguiſhed from venereal ones,

1*ſt*, By their different appearance.

2*dly*, By their ariſing only, or growing worſe, during the uſe of mercury.

3*dly*, By their having been unſucceſsfully treated with mercury before.

4*thly*, By their exquiſite ſenſibility.

5*thly*, By the relaxed ſtate of the whole body, or by the flabby relaxed appearance with an ichorous diſcharge from the affected part.

6*thly*, By ſymptoms of other diſorders, either alone, or accompanied with venereal ones.

Method

Method of Cure.

It has been adviſed by ſeveral eminent medical writers, to treat all real venereal ulcers or ſhancres in the ſame manner, *viz.* by internal mercurials only, and never to make uſe of any external application. Several ſpecious reaſons have been alledged for ſuch a treatment; which, however, are not ſatisfactory to me. They ſay, that ſhancres are ſigns of the preſence of the venereal poiſon in the body; and if, therefore, they diſappear by the ſimple internal uſe of mercury, we are ſure that the medicine has penetrated into the maſs, and that the poiſon is totally eradicated. To this I anſwer, That recent venereal ulcers brought on by an original infection, are by no means ſuch ſymptoms, as has been aſſerted: On the contrary, they are in that caſe only a local diſeaſe, which requires no internal, but merely local remedies; and if no topical application is made uſe of in time, they very often ſpread amazingly, the poiſon is abſorbed, and produces either buboes or other venereal ſymptoms in the maſs. I undoubtedly allow, that if they are of ſome ſtanding, the maſs will then be in conſequence infected; in which caſe, as well as when they ariſe from a ſecondary or univerſal infection, they are certainly what has been aſſerted of them, unequivocal ſigns of the preſence of the poiſon in the maſs. Then, indeed, I perfectly coincide with the opinion, that they can be treated only by the internal uſe of mercury, without any exter-

nal application, becauſe, if they diſappear by the internal uſe of mercury alone, without having applied any external remedy, we are ſure that we have eradicated the poiſon from the maſs, and cut off the evil by the root. But if they are in the genitals, or in the extremities, the poiſon often excites violent inflammation, phymoſis, mortification, &c. or it is abſorbed and carried to the lymphatic glands, where it occaſions buboes, before the mercury has had time to produce its effects, and to deſtroy it on the part affected.

Theſe are the reaſons why I always chooſe to apply immediately to ſuch ulcers, thoſe remedies which I found the moſt effectual for removing them; becauſe I think there is no patient, acquainted with the nature of the diſorder, who would not prefer being affected with a real pox, to a mortification of the penis, or to a bubo. As to what has been ſaid and obſerved by ſome, that a bubo very often appears after ſhancres have been healed up by external applications, and that conſequently thoſe very remedies which are recommended to avoid buboes not unfrequently bring them on, I readily admit the fact: but I am very far from believing the conſequence drawn from it, *viz.* that external remedies applied to a venereal ulcer, ever promote the abſorption of the virus. It happens, in that caſe, what we ſee every day happen, without the uſe of any external application whatſoever, or what we muſt daily be afraid of, as long as there is the leaſt appearance of a venereal ulcer. What they aſcribe in that caſe

caſe to the medicines externally applied, I would rather aſcribe either to their application being too long delayed, or to their not being ſufficiently efficacious. In all caſes, therefore, where I have reaſon to apprehend ſuch bad effects, I think it not only proper but neceſſary to apply to all venereal ulcers, whether of a primary or ſecondary infection, the moſt efficacious local remedies, in order to remove them as ſpeedily as poſſible: with this difference only, that I conſider ulcers ariſing from a recent original infection as merely local, and think they may be ſafely cured by topical applications alone, without the internal uſe of mercury; whereas, thoſe ariſing from a tainted maſs require always, at the ſame time, a courſe of mercury. This laſt method I likewiſe follow in venereal ulcers of ſome days ſtanding, though from an original infection; there being always the greateſt probability that ſome of the poiſon has been abſorbed into the maſs during that time. External applications in thoſe caſes will never have any permanent effect; becauſe, if we are even able to deſtroy the poiſon in the affected part, and to conſolidate the ulcer, it will ſoon break out again on the ſame or ſome other part of the body, as long as there remains the leaſt particle of it ſubſiſting in the maſs.

The external remedies recommended for this purpoſe are, *Mercurials*, *Aſtringents*, and *Cauſtics*.

Among the mercurials, the red precipitate ſprinkled upon them every morning and evening, I found to anſwer beſt, as long as the ulcer is covered with the white lardaceous cruſt.

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The mercurial ointment in this caſe is of no uſe; but whenever the ulcer aſſumes a cleaner appearance, then the ſimple mercurial ointment, calomel in powder or ſuſpended in lime water, or, according to circumſtances, the ſublimate with lime-water, or a diluted ſolution of mercury in nitrous acid, are more ſerviceable. In caſes more obſtinate, the mercurial fumigations prove ſometimes excellent.

If the mercurial applications prove ineffectual, the external uſe of aſtringents is often extremely ſerviceable. The Peruvian bark, aqua vitriolica camphorata, a ſolution of blue vitriol, or the viride æris diſſolved in oil, are thoſe commonly made uſe of; but from the yellow copper (aurichalcum) in powder ſprinkled upon them, I know of ulcers cured which reſiſted the power of all other medicines. The ſame aſtringents will alſo ſometimes anſwer our expectations in ulcers of an atonic or relaxed appearance, yielding an acrid ichorous diſcharge.

The application of cauſtics has been lately recommended in recent venereal ulcers, ſo as to touch them every twelve or twenty-four hours with the lapis infernalis, till ſloughs falling off ſucceſſively, the baſis of the ulcer becomes red and pure. This practice is undoubtedly ſometimes proper: but there are conſtitutions which will not bear any acrid application whatſoever, eſpecially that of cauſtics. I have ſeen inſtances where, in ſuch irritable or in ſcorbutic conſtitutions, very bad ſymptoms followed; and in one caſe, where a mortification of the part was

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the conſequence of ſuch an application. In theſe ſubjects, the internal uſe of Peruvian bark with external aſtringents, or occaſionally a mercurial lotion will be more ſerviceable.

If venereal ulcers reſiſt all the means juſt now recommended, the internal and external uſe of ſtrengthening medicines, a full diet, the uſe of wine, country air, and ſea-bathing, as mentioned above, will ſometimes prove effectual when all other remedies have failed.

Of other medicines recommended for inveterate venereal ulcers, I ſhall ſpeak hereafter under the article of *Venereal Complaints incurable by Mercury*.

I have ſaid nothing about the venereal ulcers of the noſe, eyes, face, &c. becauſe they require the ſame treatment as others, and may be eaſily avoided, by taking care that a patient with a venereal gonorrhœa or ulcers of the genitals, after having touched the part affected, always carefully cleanſes his fingers.

Ulcers of the uterus or vagina, accompanied with an acrid ichorous diſcharge, are not always, as is generally imagined, cancerous, but not unfrequently venereal; and may be then often cured by proper injections, and the internal uſe of mercury. I have ſeen ſeveral women, who thought themſelves, from the pain and ichorous diſcharge tinged with blood, affected with a cancer of the uterus, believing in that point the judgment of their attendants, radically cured by the internal uſe of powerful, ſtrengthening, and abſorbent medicines, and by injecting a ſolution of ſublimate or calomel in lime-water, alone or mixed with the tincture of maſtic, or, according

to circumſtances, the infuſum corticis Peruv. in aqua calcis.

But we are miſtaken if we expect any good in this caſe, as well as in the fluor albus or hæmorrhagy of the womb, from injections, as they are commonly uſed. If we wiſh to ſee any effect from them, they muſt be applied to the affected part; and therefore not thrown in the common manner into the vagina, in expectation that they will of themſelves, by theſe means, reach the ſeat of the diſorder, or the cavity of the uterus. A proper ſyringe of a particular form and ſize, calculated to prevent the matter injected from eſcaping at the ſides, muſt be introduced as high as poſſible into the vagina, or, if poſſible, into the orifice of the uterus itſelf; the patient lying a little declined, and her knees bent: and in this ſituation the injection is to be applied, either by herſelf or by an aſſiſtant, three or four times ſucceſſively, keeping the ſyringe always in for ſome minutes, and repeating the ſame operation ſix or eight times a day.——A ſyringe made of a bottle of elaſtic reſin, with a thicker and longer pipe than common, will anſwer for the above purpoſe extremely well, and will effectually remove the prejudices hitherto ſo juſtly entertained of the inefficacy of injections in females.

For *cancerous ulcers* of the genitals as well as of other parts of the body, the Materia Medica has, to my knowledge, nothing to afford; and all thoſe medicines hitherto recommended for curing cancers, appear to be deceptions of the inventors themſelves or of the public. Surgery alone can radically

radically cure cancers, if applied in time; and no honeſt phyſician will ever recommend uncertain remedies, leſt, by temporizing, he ſhould for ever loſe the moment where he could have applied a certain one, I mean the extirpation not too late deferred where it can take place.

ON VENEREAL FISTULAS.

In treating of venereal ulcers, we muſt ſay a word about venereal fiſtulas, which are nothing but venereal ulcers penetrating deep into the cellular membrane and adjacent parts, with a ſmall callous orifice, and callous inſide. Their ſeat is moſtly in the urethra, groins, perinæum, anus, &c. but ſometimes alſo in the lachrymal ſac of the eye.

Beſides the internal adminiſtration of mercury, the injections above recommended ought to be tried; if they do not ſucceed, the chirurgical operation ought to be performed. We ſhould, however, never attempt this latter before we have carefully eradicated the venereal virus from the tainted maſs. From the neglect of this point, we ſee daily, that ſuch patients undergo two or three times the operation, without being the better for it: the fiſtula remains as obſtinate as it was before; or, healing in one place, it ſoon breaks out in another. If the fiſtula heals quick and perfectly after the operation, it is a certain ſign that the patient has been radically cured of the lues.

The fiſtula lachrymalis, ariſing from the venereal virus

virus lodged in the lachrymal ſac, yields very often a yellow greeniſh diſcharge, reſembling that oozing out of the urethra in a clap. Whether it ever ariſes from a ſuppreſſed or retropulſed gonorrhœa, I cannot poſitively ſay; but it owes its origin frequently to the venereal poiſon depoſited from a tainted maſs, and requires internal and external mercurials.

The virus oozing out from venereal ulcers and fiſtulas, is ſometimes of a very corroſive nature: they ſhould therefore be dreſſed with a piece of ſoft ſponge every twelve or twenty-four hours; and the ſurrounding ſurface of the ſkin ſhould be carefully defended, by anointing it with the white cerate, or ſaturnine liniment.

CHAP.

CHAP. VIII.

Of the PHYMOSIS.

THIS diſeaſe, in which the prepuce is ſo ſtraitened on the point of the penis that it cannot be drawn back over the glans, has been called *Phymoſis*, from the Greek φιμοω, *præcludo, obturo;* and might be perhaps in our language more properly called a *coarctation* or *ſtricture of the prepuce.*

To this diſorder are eſpecially ſubject men who from nature have the glans covered with a more ſtrait prepuce, or have too ſhort or too ſtrait a frænum; all thoſe whoſe religion orders circumciſion, are free from it.

This diſorder ariſes, in our days, generally from venereal ulcers in the inſide of the prepuce, or from the *Blennorrhagia balani*, (*gonorrhœa ſpuria*), producing a violent ſwelling and inflammation of the prepuce.

It has been recommended, if the phymoſis be violent, to make an inciſion of the prepuce; which is certainly ſometimes neceſſary; but, where chirurgical operations can be avoided, I think they ought. This operation has been adviſed principally either to prevent the ſpreading of ſhancres, which are frequently the cauſe of the phymoſis; or to avoid buboes; or, what is ſtill more material, to prevent (if there be any ulcers)

ulcers) a concretion of the glans with the prepuce. Thoſe who, in curing ſhancres, truſt entirely to the internal uſe of mercurials, will hardly inſiſt upon this operation. As to the danger of their producing buboes by an abſorption of the poiſon, I allow the apprehenſion to be perfectly juſt; but I cannot admit, that an inciſion would prove a preventative. A freſh wound, by expoſing a freſh and larger ſurface to the abſorption of the virus, muſt, in my opinion, rather increaſe the danger. I think it, therefore, more proper to obviate thoſe bad conſequences by proper injections, and by introducing ſome fine lint once or twice a-day with a probe between the prepuce and glans. However, if this ſhould be impracticable, or livid ſpots ſhould appear thro' the prepuce, immediate recourſe to the operation ought to be had, leſt a greater evil, a mortification, ſhould enſue.

In order to aſcertain whether there is a venereal ulcer between the prepuce and glans, I introduce a probe, with ſome lint affixed to it. Then, turning it round the whole glans, the patient generally feels pain, if there is any ulcer, as ſoon as the probe with the lint touches it; and upon withdrawing it, a part of it will be ſtained with purulent or puriform matter; whereas, if there is but a ſimple gonorrhœa ſpuria without any ulceration, the whole of the lint will be ſtained with the ſame equally. In either caſe, if the inflammation and ſwelling is violent, I apply a poultice made of bread and water mixed with ſome acetum lithargyrii; and inject three or four times

times a-day a diluted ſolution of mercury in nitrous acid, or the ſublimate or calomel ſuſpended in lime-water, or, according to circumſtances, Plenk's ſolution of mercury with gum arabic, between the prepuce and glans, in ſuch a manner, that the interſtice between them is filled and diſtended with the injection. If there be any ulcer, ſome lint dipped in the ſame, may be applied to it, by means of a probe, once or twice a-day. I think there is never any danger of a concretion of the parts as long as the ulcers remain venereal; and in the mean time their nature is changed, the phymoſis is alſo generally removed. Internal mercurials ought in ſuch caſes never to be omitted. But, as I have obſerved juſt before, the inciſion of the prepuce ought to be immediately performed, if the inflammation be very high; if there appears any danger of mortification; or if we have reaſon to ſuſpect, beneath, an ulceration of a bad or perhaps cancerous nature.

CHAP. IX.

Of the PARAPHYMOSIS.

PARAPHYMOSIS, a word derived from the Greek Παρά *de*, and φιμός *præculſio, obturamentum*, ſignifying the oppoſite of phymoſis, is a diſeaſe where the prepuce, being drawn behind the glans, is ſo contracted there, that it cannot be brought again forwards over the glans; and would for this reaſon, in my opinion, be more properly named a *ſtrangulation of the glans*.

Men who from nature have a ſtrait prepuce are moſt ſubject to this diſorder, which ariſes either from venereal ulcers, or from a preternatural ſwelling of the glans, as is ſometimes the caſe in violent claps. I have little to add to what has been ſaid on the ſubject by Celſus, and by ſome modern writers.

I have ſeen an inſtance where a gangrene of the glans was the conſequence of ſuch a ſtrangulation, before the ſurgeon could come to give aſſiſtance. We ought therefore to uſe our utmoſt endeavours to bring the prepuce forwards as quick as poſſible.

The moſt effectual remedy is to ſprinkle repeatedly cold water upon the part, in the mean time gently preſſing the ſwelled glans with the fingers

fingers dipped repeatedly in cold water, ſo as to ſqueeze out, if poſſible, all the blood extravaſated in its cavernous ſubſtance. By theſe means, the turgeſcency of the corpus cavernoſum glandis will be moſt efficaciouſly diminiſhed; and by ſkilful management, gently preſſing the glans backwards, whilſt we endeavour with the fingers of the other hand to bring the prepuce over it forwards, we ſhall very often ſucceed, and relieve the patient from imminent danger. Ice, or water rendered by art as cold as ice, may perhaps be uſeful to the operator in accompliſhing this deſirable effect; but if the diſeaſe be accompanied with a venereal gonorrhœa, we muſt be cautious with regard to the application of cold, leſt we might bring on a worſe complaint, by repulſion, than the diſeaſe for which cold is applied. If we are not ſoon able to reduce it, and the ſymptoms be violent, we ſhould not defer the operation, but make an inciſion in the prepuce or frænum; an operation by no means dangerous, but abſolutely neceſſary to prevent the moſt diſagreeable of all conſequences of venereal complaints, a mortification of the glans penis. If there are venereal ulcers in one ſide, I prefer always to make the inciſion of the frænum or prepuce on the other ſide; in order to ſecure the wound, as well as poſſible, from the poiſon, and to prevent its abſorption by the lymphatics of the freſh wound.

CHAP. X.

On VENEREAL BUBOES.

A SWELLING of any of the lymphatic glands of the body is called a *Bubo;* and if such a ſwelling is occaſioned by the venereal poiſon, we then call it a *Venereal Bubo.* The latter only comes within the plan of this treatiſe.

Though buboes may ariſe in any part of the body where lymphatic glands are ſituated, yet we have no authentic obſervation of their ever exiſting any where except in the lymphatic glands of the groin, under the arm-pit, or of the extremities; and even of theſe, the latter are much leſs frequent than the former.

Venereal buboes ariſe from two cauſes, eſſentially different from one another; this difference has in general not been attended to with that accuracy which the importance of the ſubject might ſeem to require. Buboes have hitherto been ſuppoſed to ariſe always from the venereal virus abſorbed by the lymphatics, and by them carried to the gland; but this is not always the caſe. Buboes frequently owe their origin to the poiſon lodged on the ſurface of the body, irritating there the mouths of the lymphatics, without being abſorbed by them. Theſe veſſels being irritated, produce a ſwelling in the neareſt lymphatic

phatic gland they go to. In the one caſe the cauſe of the bubo lies in the gland itſelf, in the other without it; ſo that we may properly diſtinguiſh them, by calling the former an *idiopathic*, and the latter a *ſympathic* bubo.

This diſtinction, founded on the moſt evident facts, is abſolutely neceſſary to regulate the method of cure.—But the diſtinction of idiopathic buboes into *primary* and *ſecondary*, viz. ſuch as ariſe from an original infection, and thoſe which are ſuppoſed to owe their origin to the poiſon depoſited from the maſs into the gland, ſeems to be of no practical uſe whatever.

Idiopathic venereal buboes, as we have obſerved, owe their origin to the venereal poiſon abſorbed and lodged in the gland. This abſorption frequently takes place after the virus has by its acrimony produced ſome ſlight excoriation or ulceration in the ſurface of the glans, prepuce, urethra, genital parts, or extremities. Whether a bubo ever ariſes, as has been hitherto generally aſſerted, from the venereal virus being depoſited from the maſs into the gland, as peſtilential buboes ſeem to ariſe in the plague, is with me as yet a matter of doubt; this aſſertion ſeems hitherto rather founded on a gratuitous ſuppoſition than on real obſervation. But that buboes may ſometimes, though ſeldom, ariſe from an immediate abſorption, without any previous excoriation or ulcer in the ſurface of the body, is probable from ſeveral authentic obſervations; though this opinion has been controverted by ſome modern writers.—About 12 years ago, three

ſoldiers came into the military hoſpital in one week, all affected with a bubo from the ſame woman. They had all been in perfect health a few days before; neither had any of them the leaſt excoriation in the genitals or thigh now, nor even any appearance of a running.—Whether this immediate abſorption is owing to a torpid and leſs irritable habit of body, or to the greater ſubtilty or leſs irritating nature of the virus in ſome caſes, I pretend not to aſcertain. But to this immediate abſorption it is perhaps owing, that we cannot always avoid a bubo, or perhaps even the lues itſelf, by uſing the beſt preventatives; though they may moſt effectually prevent gonorrhœas and original ſhancres.

That idiopathic buboes ariſe not only from the abſorption of the venereal poiſon from ulcers of the genitals or urethra, but likewiſe from venereal ulcers in any part of the upper or lower extremities, is confirmed by experience. I ſhall adduce a few examples by way of illuſtration.—A moſt intimate friend of mine had, ſome years ago, the misfortune of being affected with ſhancres. Being then on his travels, he took ſome mercurial pills; by the uſe of which the ulcers were cured in about ten days. The pills were then diſcontinued, and he had no complaint till ſix months after, when he was one night awaked by a violent itching at his right elbow. Next night, the itching returned; and the third morning, upon examining the ſpot, he found it covered with a thick yellow ſcurf like a tetter. As he was at that time on a journey,

journey, he delayed taking advice; thinking that his complaint might perhaps go off. But, two days after, he perceived a ſwelling under his arm-pit; which, in three days more, increaſed to ſuch a degree, that, when he came to me, he was obliged to keep his arm a conſiderable way out from his ſide. I told him the nature of his complaint. In a few days, by proper applications, the tumour was diſcuſſed, and my patient perfectly cured ſome weeks after.

Soon after, I was conſulted by a gentleman who had undergone a mercurial courſe about fifteen months before, for a venereal complaint, of which he imagined himſelf perfectly cured. Some weeks before he applied to me, he began to feel a pain in the middle of the ſternum, which he took to be rheumatic. On this ſuppoſition, he rubbed the part affected with a piece of flannel, morning and evening. Thus the pain in the ſternum was removed; but the ſecond morning after, the great toe of the left foot, and that next to it, were in like manner affected. This pain being removed by friction with flannel as before, returned to the ſternum; from which being driven by a ſimilar friction, it again returned to the foot. He now began to imagine that his complaint was of a gouty natute; but having occaſion to go abroad that day, he bathed his foot in warm water, and pared a corn which he had upon one of the affected toes, in order to walk the more eaſily. In performing this operation, he cut too deep, and a few drops of blood came. Upon this he immediately deſiſted: but the next day, on examining

the part, he found a little ſuppuration had taken place; upon which, he covered the ſore with a piece of clean linen.—The ſecond evening, he felt a ſlight pain in the groin, which he then diſregarded; but in a few days after, when one of the glands ſwelled to the bigneſs of a pigeon's egg, he aſked my advice. I informed him that he had not been radically cured of his former diſorder, and that the preſent ſymptoms were a conſequence of it; that the pain both of the ſternum and of the toes was venereal; and that from the wound of the toe, and ſucceeding ſuppuration, the poiſon had been abſorbed by the lymphatics, and carried to the firſt gland they met, which in this caſe was one of the lower lymphatic glands of the groin. The ulcer of the toe ſtill continued, but was very ſmall, and diſcharged a little matter reſembling puſs. I applied upon it a mercurial plaſter, and cured the bubo, as well as the cauſe of it, by a courſe of mercurial frictions.

Some years ago, an eminent accoucheur in London, was called to deliver a woman, who unknown to him was affected with ſhancres. Ulcers on his hand, and a ſwelling of the lymphatic gland of the fore-arm, which proved very obſtinate, were the dreadful conſequences.

Sympathic venereal buboes, as I have already mentioned, owe their origin, not to the abſorption of the venereal poiſon, but to an irritation of the mouths of the neighbouring lymphatic veſſels. This ſpecies of bubo we frequently meet with in ſimple venereal gonorrhœas; or, where one of the glands is idiopathically affected, we ſometimes ſee

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two or three contiguous thereto, ſwelled by ſympathy. In this caſe, however, only that which is really infected, continues to increaſe in bulk; while the others remain in the ſame ſtate, and at laſt diſappear without any increaſe of their ſwelling.

Sympathic buboes go off ſpontaneouſly, as ſoon as their irritating cauſe in the neighbourhood is removed; and it is only this kind of buboes, which quacks, with their pretended noſtrums, ſeem to remove ſometimes in a few days; while, on the other hand, we frequently hear ſome patients complaining of intelligent phyſicians, for not having been ſufficiently expeditious in curing their bubo, or not having done it without ſuppuration, though they had formerly been radically cured by a quack, by the ſimple application of a mercurial ointment or plaſter to the part affected. If ſuch patients, however, were acquainted with the difference between the true nature of their preſent and former complaint, they would eaſily ſee, that, in the former caſe, the cure was not to be attributed to the ointment or plaſter applied, but merely to the nature of the diſeaſe; whereas, in the latter, great ſkill and attention is often requiſite, either to diſcuſs a bubo, or to cure it, after the attempt to diſcuſs it has proved ineffectual.

Having eſtabliſhed this eſſential diſtinction betwixt Idiopathic and Sympathic buboes, I ſhould now proceed to ſpeak of the method of treating them; but, previous to this, I think it uſeful to take notice of ſome prejudices which are entertained by many, concerning the nature and cure of this complaint.

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By many people, eſpecially thoſe who inhabit the more ſoutherly parts of Europe, it is reckoned dangerous to reſolve or diſcuſs a venereal bubo. This prejudice ariſes from an opinion, that the virus is by this method repelled and abſorbed into the maſs, where it afterwards occaſions a general infection: whereas, if the bubo is cured by ſuppuration, they imagine that no infection of the maſs is to be apprehended; but that, on the contrary, even in caſe any poiſon ſhould have been abſorbed during the ſuppuration, not only the virus lodged in the gland is carried off, but likewiſe the whole maſs is thereby purified. Hence they imagine that the abceſs formed by the ſuppuration of the bubo, is a kind of channel for cleanſing the body entirely from the venereal poiſon. As this opinion, however, is not only altogether erroneous, but may prove hurtful to the patient, at leaſt by depriving him of an advantage which he might otherwiſe have enjoyed, I muſt make two obſervations on this ſubject. *Firſt*, That, by the modern improved practice of applying mercurial frictions, the diſcuſſion of a bubo cannot poſſibly occaſion any ſuch thing as a *repulſion* of the venereal virus into the maſs; but that, on the contrary, by following this method, the virus lodged in the gland itſelf is effectually deſtroyed: and, *ſecondly*, That, though the virus ſhould have been actually repelled from the gland into the maſs, ſuch a repulſion would ſtill be preferable to the method of curing the bubo by ſuppuration.

But in order to ſet this matter in the cleareſt light,

light, I muſt have recourſe to the anatomical diſcoveries which have been made about the lymphatic ſyſtem; and then conſider what muſt be the conſequence of mercurial frictions applied in the manner to be mentioned hereafter.

We know, from the obſervations of Profeſſor Alexander Monro, and thoſe of the late Dr W. Hunter, and particularly from Mr Hewſon's plates*, that the lymphatic or abſorbent veſſels begin every where on the ſurface of the body, with the ſmalleſt ramifications; that, in going upwards from the lower extremities, they unite into larger branches, which terminate in the inguinal glands, pouring into them the liquid which they have abſorbed at their extremities. This liquid, which in a natural ſtate is nothing but mild lymph more or leſs diluted with water, which has been abſorbed from the ſurface of the body, after being poured into the lymphatic inguinal glands, is again abſorbed by other lymphatic veſſels, which carry it to the abdomen, and thence through the thoracic duct into the maſs. Let us now ſuppoſe that ſome of the venereal poiſon has been abſorbed by the lymphatic veſſels of the genital parts, or of the lower extremities, and that conſequently it has been carried along with the lymph into one or more of the

* But this, as well as the anatomy of the whole lymphatic ſyſtem, and the diſeaſes depending thereon, will be more eſpecially illuſtrated by the ſingularly accurate and beautiful plates executed under the direction of *Mr Sheldon*, at preſent lecturer of anatomy in London; which it is to be hoped he will not long with-hold from the public.

the inguinal glands. The poiſon thus brought into the gland will either be abſorbed again by the oppoſite abſorbent veſſels, in which caſe it is carried into the maſs; or, what more frequently happens, it will, by its acrimony, excite an irritation, and thereby not only prevent its own abſorption, but produce an inflammation and ſwelling of the gland. In thoſe circumſtances, the moſt eligible thing both for the patient and phyſician, would be, if poſſible, to deſtroy and eradicate the poiſon lodged in the gland. For this purpoſe, we know mercury is a ſpecific; but the queſtion is, how to bring it into the affected gland. Formerly practitioners, thro' a defect of anatomical knowledge, imagined they could introduce the mercury into the gland, by rubbing the mercurial ointment upon the gland itſelf. But ſo far was this from having the intended effect, that buboes treated in ſuch a manner generally became more inflamed, ſuppurated, and even ſometimes mortified. By ſuch an application no mercury is introduced into the affected gland; or, if it happens now and then, it is merely by chance; for we know that the lymphatics ariſing from the ſkin immediately above the gland do not take their courſe into the ſubſtance of the gland, but proceed obliquely upwards to the abdomen. Hence the bad or good effects produced in that caſe are not to be aſcribed to the mercury, but rather to the mechanical irritation occaſioned by the frictions, and would probably have taken place had any other ointment been employed. But if, inſtead of rubbing the

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mercurial ointment upon the gland itſelf, the ſame be rubbed into the thigh or leg of the ſide affected, we are to expect, according to the diſcoveries of the courſe of the lymphatic veſſels, that the mercury will be abſorbed by their extremities, and from thence conveyed to the affected gland, where meeting with the venereal poiſon, it will moſt effectually exert its ſpecific power againſt it. That this is really the caſe, appears from the ſucceſsful practice of this method; for, if the mercurial frictions have been applied upon the proper place, and in time, before the inflammation has gone to too great a length, we find, that, in eight buboes out of ten, the poiſon is thereby either deſtroyed, or at leaſt ſo changed in its nature, that it is now no more capable of irritating the gland any further; nor do we obſerve, that the virus thus changed, and then abſorbed along with the mercury, does ever afterwards produce any venereal ſymptoms in the maſs.

But let us even ſuppoſe that the mercury has not deſtroyed the poiſon lodged in the gland, but has driven it into the blood, as thoſe patients commonly believe. What will be the conſequence? The ſame, undoubtedly, as when a victorious hero diſlodges and chaſes a flying enemy before him. The very ſame remedy which drove the poiſon from the gland into the maſs, will purſue it there alſo; and either expel it altogether, or render it, one way or other, inoffenſive to the body.

To elucidate this matter ſtill further, I muſt anſwer

anſwer a queſtion which I have heard frequently propoſed, viz. Why does the method of rubbing mercury into the extremity not always ſucceed in diſcuſſing the bubo in every ſtage of the diſorder? For the ſolution of this queſtion, we muſt again have recourſe to anatomy. From this we know, that there are two ſeries of lymphatic glands in the groin, called the upper and lower inguinal glands. In moſt people there is a communication between theſe two orders of glands: in this caſe, the lymphatic veſſels of the inferior glands communicate with the ſuperior ones, whence again others ariſe which take their courſe through the abdomen into the thoracic duct. But in other perſons there is no ſuch communication; the lymphatic veſſels of the inferior inguinal glands proceed directly to the abdomen, without inoſculating with the ſuperior ones. Now, the venereal virus being abſorbed by the lymphatics of the genitals, is generally carried to the ſuperior inguinal glands, where it produces the bubo. Whenever therefore the inferior inguinal glands have the above-mentioned communication with the ſuperior ones, the mercury rubbed into the inſide of the thigh or leg will be abſorbed, carried to the inferior, and from thence to the ſuperior inguinal glands, where it will produce the deſired effect. But, on the other hand, where no communication of this kind takes place, the mercury is carried from the extremity to the inferior inguinal glands, and from thence to the abdomen, without ever reaching the affected

fected gland, on which of conſequence it can produce no effect *.

But let us even go further, and ſuppoſe, that the method of treatment juſt recommended has not been followed; but that, inſtead of it, the irritating matter has been blunted, and the abſorption of the poiſon from the gland effected by other ſedative or diſcutient applications. What will be the conſequence? I anſwer, inſtead of a bubo, the patient will be affected with a diſeaſe of the whole ſyſtem; which, if recent, may be certainly and radically cured in a few weeks time, without any bad conſequences remaining; whereas the complaint with which he was affected before, is ſometimes very dangerous, at other times extremely obſtinate, and always of a very tedious nature. Beſides, even when the ſuppuration is of the beſt kind, which, however, is far from being always the caſe, the poiſon, before or after the abſceſs is formed, inſtead of being entirely evacuated, is if not conſtantly, at leaſt very frequently, abſorbed into the ſyſtem. Thus the diſorder which the patient ſo much dreaded is really produced; for the cure of which he will at laſt be obliged to have recourſe to mercury, the remedy he was formerly ſo much afraid of.

Let us now proceed to the method of cure.

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* The ſame will likewiſe happen where the inflammation of the bubo is gone too far, or where a ſcirrhoſity is formed in the gland. Mercury in theſe caſes can have little or no acceſs to the gland; or though it could, would yet be very little able to change the nature which the diſeaſe has now aſſumed.

Method of Cure.

From the obſervations laid down, it appears, that every unprejudiced practitioner, in any caſe of an idiopathic bubo, ſhould always attempt to diſcuſs it as ſoon as poſſible, by any method whatever, provided the inflammation has not riſen to too great an height, or ſigns of ſuppuration have already made their appearance. The moſt effectual method of diſcuſſing tumours of this kind, is, as I have already mentioned, by mercurial frictions applied to the inſide of the thigh or leg of the affected ſide if the bubo happens to be inguinal, or to the arm if the bubo be under the arm-pit. Occaſionally alſo, in the former caſe, frictions may be uſed to the perinæum or ſcrotum. But as the ſucceſs of theſe frictions is limited to a few days, they ought to be made not only with due care and attention, but, if circumſtances permit, be repeated twice a-day. Veneſection or a purge will, occaſionally, likewiſe contribute greatly to the intended effect.

To the gland itſelf I never apply any thing but a mercurial plaſter; and from this I expect nothing towards the accompliſhment of the cure, but make uſe of it only to keep the patient's mind eaſy. Of late a poultice made of the root of *Atropa mandragora* has been much recommended for the reſolution of a bubo; and by others a poultice made of the root of *Daphne mezereum*. They certainly both deſerve to be tried, either alone, eſpecially

cially where the frictions ſeem to have no effect, or along with the frictions. In obſtinate caſes alſo, I would adviſe the application of dry cupping glaſſes to the ſwelled gland, which has been attended with ſucceſs at Edinburgh. Repeated vomits, with cold applications to the part affected, have been likewiſe recommended as uſeful for the diſcuſſion of a bubo; but I have never had occaſion to try either of theſe remedies; nor indeed the hemlock, which has been praiſed for this purpoſe both as internally and externally exhibited.

During the whole time that a reſolution of the bubo is attempted, the patient ought to abſtain from exerciſe, and confine himſelf to a very low diet; as a contrary regimen might greatly tend to increaſe the inflammation. With regard to mercurial frictions on the gland itſelf, I have already given my reaſons for diſapproving of them. Indeed moſt of the idiopathic buboes which I have had occaſion to ſee treated either in this way or by any other irritating remedies, have inflamed and ſuppurated, though the application was made with a view to prevent that diſagreeable circumſtance; and there are now but very few practitioners, let their knowledge be ever ſo little of the recent diſcoveries concerning the lymphatic ſyſtem, that would truſt to ſuch an application for producing a diſcuſſion.

When I ſay that an irritation of the gland itſelf will rather be followed by an inflammation and ſuppuration than a reſolution, I purpoſely mention an idiopathic venereal bubo; for ſympathetic buboes may certainly diſappear after the

uſe of mercurial frictions applied upon the gland itſelf, as I have frequently obſerved. We ought not, however, even in this caſe, to aſcribe their reſolution to the mercurial frictions, poultices, &c. which have been applied; but to the ſimple operation of nature; becauſe ſympathetic buboes will always go off by themſelves without any application whatever. For their removal, as I have already obſerved, nothing more is requiſite than to abate or remove the ſtimulus from the mouths of the lymphatics. This fact is ſufficient, I think, to convince us of the importance of diſtinguiſhing in practice the idiopathic buboes, or ſuch as owe their origin to the venereal virus abſorbed from ſhancres of the genitals or extremities, from ſympathetic ones, ariſing from the mere irritation of the lymphatic veſſels, and generally accompanying ſimple gonorrhœas, ſwelled teſticles, &c. without the appearance of any venereal ulcer.

Thus far with regard to the treatment of venereal buboes by reſolution. I now come to treat of thoſe that are either too far gone to admit of reſolution, or that reſiſt it on any other account.

That a bubo will not admit of reſolution, we know by the tumour continuing to increaſe in ſize, and becoming red and painful after the proper application of the mercurial frictions or other reſolvents had been made uſe of for four or five days. As ſoon as we obſerve, thus, all our attempts to procure a reſolution fruſtrated, we are now to employ all means to bring on as mild and

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ſpeedy a ſuppuration as poſſible. Here, however, we meet with three kinds of buboes eſſentially different from one another, each of which requires a treatment peculiar to itſelf, nay diametrically oppoſite to that of the other. This diſtinction is ſo material, that the treatment which will bring the one kind to a mild ſuppuration, if applied to the other, may occaſion very dangerous ſymptoms, and even prove fatal.

In the *firſt*, all the ſymptoms of inflammation run very high, ſometimes even to mortification; in the *ſecond*, the ſame ſymptoms ſeem to ariſe from too great an irritability of the body; whereas, in the *third*, the moſt irritating medicines are hardly able to raiſe the inflammation to ſuch a pitch as is neceſſary for bringing on a ſuppuration. In the former, it is neceſſary to moderate the inflammatory diatheſis: in the latter, to excite and augment it. When the patient, therefore, is otherwiſe of a healthy, ſtrong, and vigorous conſtitution; the inflammation high; the pain ſevere, and accompanied with an inflammatory fever; bleeding, ſometimes even repeated as circumſtances require, may be neceſſary. Leeches, however, or, in want of them, ſcarification of the part affected, are often preferable to general bleedings. In other reſpects, low diet, cooling drink, an antiphlogiſtic purgative, the warm bath, and an emollient poultice applied conſtantly warm to the gland, and changed when it grows cool, are to be inſiſted upon in theſe kinds of buboes.

In the ſecond kind, the ſymptoms of inflammation ſeem to run very high, merely from too great an irritability. But this may be eaſily diſtin-

guiſhed from the other, by the weaker, ſmoother, and more frequent pulſe; as alſo by the conſtitution of the patient. In ſuch circumſtances, general evacuations, inſtead of being of ſervice, I obſerved in general to be really prejudicial: the patient, on the contrary, ought to be allowed a fuller diet; opium ought to be given every night or every other night, the Peruvian bark through the day; and to the external emolient applications we here properly join ſome ſedative. In a caſe of this kind probably it was, that Mr Brambilla ſaw a young man to whom a bubo proved fatal by becoming gangrenous, after a courſe of calomel along with a ſtrong decoction of the woods was adminiſtered to him. I muſt make upon this occaſion a general remark, that mercury ought never to be given either internally or externally, unleſs for ſome very particular reaſon, during the inflammatory ſtate of a bubo, or any other venereal complaint. During that ſtate, I have never ſeen any good, but often very bad effects reſulting from it, and more eſpecially when rubbed into the inflamed gland.

The third kind of buboes, eſſentially different from the two former, we meet not unfrequently in patients of relaxed, debilitated, or of a cachectic or ſcorbutic habit of body. When this is the caſe, the tumour of the gland, though it ſeems red and inflamed, will riſe very little and ſlowly; the patient feels but little pain; no fever attends; or, if any, it is rather of the low kind, and the pulſe is weak, with ſome depreſſion of ſpirits.—In ſuch caſes, (that of ſea-ſcurvy excepted) mercury will ſometimes be uſeful and neceſſary, but evacuations of any kind are hurtful; a full diet with wine will be

be proper; and an infuſion of bark in wine or ſome other ſtrengthening and aromatic medicines, together with local applications of more or leſs active ſtimulants, will be proper.

If ſymptoms of the ſea-ſcurvy prevail, mercury ought never to be made uſe of; the patient may, beſides the uſe of wine and Peruvian bark, &c. eat oranges and other ripe fruit, or make uſe of the juice of antiſcorbutic herbs, and take moderate exerciſe in a free open air every day.

If by theſe means, or by any other method, the bubo is at laſt brought to ſuppuration, moſt writers adviſe the artificial opening of the abſceſs; but I chooſe rather to leave this to nature. From experience I have found, that nature, left to herſelf, ſcarce ever fails to make an opening in due time; whereas, artificial openings are often made before nature deſires it, to wit, before the abſceſs is fully formed and ripe. I have beſides obſerved another advantage; viz. that the abſceſs opened by nature generally heals much eaſier; whereas, that opened by an inciſion, or the application of a cauſtic, I have ſeen ſometimes followed by diſagreeable conſequences, not only making the cure more tedious and troubleſome, but leaving a large cicatrix behind; which laſt we ought always to make an eſſential point carefully to avoid, eſpecially in women, for reaſons ſufficiently obvious. In this we ſhall generally ſucceed, if the operation is left to nature. The abſceſs then, does generally not open, till there is a thorough ſuppuration of the gland; and the cicatrix is in a ſhort time after, for the moſt part, either ſcarcely viſible, or entirely diſappears.

There are, however, ſome particular caſes in which it may be proper to aſſiſt nature, either by making a dilatation of the opening, or making an artificial inciſion altogether. Where we meet with buboes, which, notwithſtanding the means above mentioned, remain inflamed and hard, without either coming to a reſolution or ſuppuration, beſides other remedies a ſmall bit of the lapis infernalis or common cauſtic, about the ſize of a pea, may be advantageouſly applied to the middle of the bubo, for about two, or at moſt three hours, the eſchar afterwards anointed with a little of the unguentum cœruleum fortius, and the whole covered with a warm emollient poultice. This method, firſt propoſed by Mr Plenck, I have ſeen ſeveral times followed with ſucceſs.

Here I muſt add, that, in ſeveral inſtances, I have obſerved the common method of applying a large cauſtic on the bubo for ten or twelve hours, in order to bring it to ſuppuration, attended with very bad conſequences. The event, in two caſes, was a mortification, and in others a very large ichorous and bad ulcer, which in one inſtance appeared really to grow cancerous, and at laſt proved fatal to the patient: this, I have never ſeen happen from the application of the ſmall cauſtic above mentioned.

In other caſes, inſtead of the cauſtic, we may ſometimes expect the ſame effect from an application of the emplaſtrum commune cum gummi; or from a poultice made of onions ſimply roaſted, or boiled in oil. A ſuppurative liniment has alſo been recommended, made of equal parts of the unguentum

guentum de arthanita, the unguentum mercuriale, and the bruiſed mandragora root, mixed with a ſufficient quantity of honey; but I never had an opportunity of trying it.

When the abſceſs has been opened either by nature or art, we are generally adviſed to adminiſter mercury internally and externally, and thus treat the ulcer as a venereal one. This practice is generally undoubtedly very good; but in ſome caſes mercurial frictions, or mercury given internally, will prove hurtful, nay often give riſe to very dangerous ſymptoms.

No general method, therefore, can be laid down for the treatment of an exulcerated bubo; but the practitioner muſt be directed by the nature of the diſeaſe, and the conſtitution of the patient, as mentioned above, where I ſpoke of the inflammatory ſtate of buboes. If the patient be vigorous, without fever, the puſs of a good conſiſtence and mild nature, no external application to the ſore ſeems neceſſary; but a continuation of the ſame poultice which brought on the ſuppuration, will certainly forward the cure more than any thing elſe. If the abſceſs aſſumes the nature of a venereal ulcer, mercurial injections may be joined to the internal uſe of that mineral.

But there are other caſes of ulcerated buboes, which have hitherto either been entirely overlooked, or not properly attended to. Sometimes the abſceſs, inſtead of healing, either remains, under the continued uſe of mercury, in the ſame ſtate for many weeks, or aſſumes a relaxed and flabby appearance; the diſcharge is copious,

thin, and ichorous; at the same time, that the health of the patient, instead of growing better, gradually grows worse and worse. In these circumstances, a quite different treatment will be necessary. If the mercury before administered, has produced some sensible effects of its having been absorbed into the mass, we should not obstinately ascribe the present symptoms to the inefficacy of the mercurial preparation we have made use of, and consequently have recourse to another. We ought rather to take the hint given by nature, and not persist longer in the use of a remedy from which we find no good effect. Mercury is a poison for those patients: they require a full diet, wine, an infusion of the bark in wine, with a free use of the country air, and gentle exercise. For the ulcer, an injection of the aqua vitriolica camphorata, or, according to circumstances, a fomentation with the Peruvian bark repeated twice or three times a-day, is the necessary application; the sore should be covered with fine lint or a piece of soft sponge, that the matter may be freely discharged. The dressings may be kept on by a piece of adhesive plaster spread on linen. To prevent excoriations of the thigh from the acrid discharge of such ulcers, the application of a little white cerate to the surrounding part will be sufficient.

The following case will serve as an illustration of what I have just now asserted. An ulcerated bubo was, according to the common course of practice, treated as a venereal one, by the internal and external use of mercury. The patient was by this

this method, after eight weeks time, ſo much reduced, and the ulcer had ſo bad an appearance, that it was thought proper to have the advice of another perſon; when I was conſulted. I found, upon examination, the flabby relaxed *atonic* appearance of the ulcer. I told the phyſician and ſurgeon, who hitherto had treated the patient, that I thought the continuation of mercury improper; that the internal and external uſe of ſtrengthening medicines, and a full diet, with wine, were the only remedies. They both were of opinion, that my advice was an unreaſonable one; and that the uſe of mercury was to be continued, only in a different preparation. However, after a good deal of converſation, I prevailed on them to try only for eight or ten days what I had propoſed; and the patient finding the courſe agreed with him, he continued the ſame for about ſix weeks, when he was perfectly recovered.

A ſimilar caſe occurred ſome time ago to a friend of mine in London, who gave the ſame advice to a patient that had been treated before for a long time in the like manner, and the patient found the ſame benefit of it. A remarkable circumſtance I muſt take notice of, which happened with this latter patient: under the courſe of mercurials he ſweated every night a great deal; he put on every morning a clean ſhirt, made of new linen; all theſe ſhirts, about a dozen in number, after having been once or twice waſhed with other linen in the common manner, grew ſo tender, that they ſeemed to be quite rotten.

If, after a ſuppuration has taken place, and the abſceſs

abſceſs has been opened, part of the gland ſhould ſtill remain ſwelled and hard, repeated purges, with the continued uſe of the above-mentioned remedies, will effectually remove that diſorder.

The ſinuſes or fiſtulas which are ſometimes apt to ariſe after ſuch ulcers, are for the moſt part eaſily prevented, as well by proper injections, as by a ſuitable poſture of the patient when in bed, and by a gentle, but careful preſſure, ſqueezing out the matter all round, every morning and evening.

If fiſtulas or ſinuſes have been formed from an ulcerated bubo, and refuſe to yield to the above-mentioned injections, the knife muſt be employed: however, they ſeldom or never occur, if the ſurgeon be attentive to the poſture of the patient, dilate the opening in time if neceſſary, and the patient complies exactly with his directions.

Hemlock, both internally and externally applied, has been ſtrongly recommended for cancerous as well as ſchirrhous buboes: but I never ſaw it effect a radical cure where there was a real cancer; though there is nothing to hinder its being tried: but in ſuch caſes, the only method, that I know for avoiding death, or at leaſt a moſt miſerable life, is the total exciſion of the cancerous gland, if practicable, and that not too long deferred.

Having thus finiſhed the treatment of topical venereal complaints, I now proceed to thoſe ariſing from an univerſal infection, or, as it is commonly called, a *confirmed pox*.

CHAP.

CHAP. XI.

On the SYPHILIS, *or Venereal Diſeaſe in particular.*

HAVING premiſed ſome neceſſary obſervations concerning venereal infection, the nature of the virus, and the different appearances of ſyphilitic complaints in general, in the beginning of this treatiſe, I now enter into the conſideration of the nature, ſymptoms, and cure of the ſyphilis or venereal diſeaſe, commonly called *confirmed lues* or *pox*, in particular.

The effects or ſymptoms which the venereal virus is apt to produce when abſorbed into the maſs, are ſhortly as follow.

1. *In the eyes:* The moſt violent of all inflammations, with a diſcharge of puriform matter, (from a repelled gonorrhœa), ending generally in perfect blindneſs; or an ophthalmy of a more chronic kind, from the venereal virus depoſited from the maſs, affecting the eye itſelf, or the eyelids; and ſometimes alſo the fiſtula lachrymalis.

2. *In the ears:* Deafneſs, with or without a puriform diſcharge, (from a repelled gonorrhœa), or from the venereal virus affecting the ear, or the orifice of the Euſtachian tube in the fauces.

3. In

3. *In the noſe.* Ulcers in the noſtrils; an ulceration of the mucous membrane of the noſe, with a caries of the bones, and a diſcharge of fetid ichor, known by the name of *ozæna*.

4. *In the mouth and throat.* Ulcers, caries of the oſſa palatina or antrum maxillare, eroſion of the velum, &c. ſore throat, coryza, paraphonia.

5. *In or about the genital parts,* it will either produce, or what indeed is more frequently the caſe, it will prove, a perpetual fomes of excoriations, ulcers, fiſtulas, gleets, warts, condylomata, polypi. Whether the gonorrhœas, ſwelled teſticles, or buboes, ever ariſe from the poiſon being depoſited there from the maſs, is with me, for want of authenticated facts, ſtill a matter of doubt, as I mentioned above.

6. *In the ſkin:* Copper-coloured ſpots, tetters, ſcabs, eſpecially on the margin of the ſcalp, or in the beard; a ſcald head, or tinea; and when the diſeaſe is very inveterate, it ſometimes, tho' ſeldom, produces a kind of leproſy over the whole ſurface of the body; a corruption of the nails, and ulcers of the moſt malignant kind, in different parts of the body.

7. *In the bones:* Either the moſt painful and excruciating ſwellings, commonly called *tophi, exoſtoſes,* &c. eſpecially troubleſome at night when the patient grows warm in bed; or an ulceration in their external, or a corruption of their internal ſubſtance, diſeaſes known by the name of *caries* and *ſpina ventoſa.* The bones moſt liable to be affected by this diſeaſe, are thoſe which are not covered with muſcles, as the tibia, the radius, the elbow,

elbow, the proceſſus coracoideus, the ſternum, the os frontis, and other bones of the head, &c.

8. Sometimes the venereal poiſon will produce effects, the nature of which is ſo concealed, that they ſeem rather owing to ſome other cauſe. Such are pains in ſeveral parts of the body reſembling thoſe of the rheumatiſm; pains in the articulations reſembling the gout; white ſwelling; nervous or hectic fevers; conſumptions of the lungs, or ſimple emaciation without any apparent vice in any viſcus of the body.—Theſe ſymptoms have by phyſicians obtained the name of *morbi venerei larvati*.

9. Sometimes the lues is really combined with other diſorders, ſuch as the ſea-ſcurvy, intermittent fevers, conſumptions, &c. Theſe are called *morbi venerei complicati*, and deſerve the utmoſt attention of the practitioner; becauſe the ſucceſs of the cure will often in a great meaſure depend on the accurate knowledge and diſtinction of theſe complaints.

The ſpecific remedy now generally applied for all kinds of venereal diſorders, is mercury in its different preparations. Though there are perhaps remedies of the vegetable kingdom equally powerful as mercury to cure the venereal diſeaſe in all its ſtages, they being either unknown or difficult to be got, are neglected. Mercury is made uſe of, not only on account of its ſpecific power againſt this diſorder, but becauſe it is a remedy which is cheap, eaſily to be got, and quick and certain in its effects; in the ſame manner, though we can cure agues by other remedies,

dies, we employ now-a-days ſeldom any thing elſe but the Peruvian bark.

Several hypotheſes have been advanced in order to explain the manner in which mercury produces thoſe powerful effects. None of them are founded on real facts; all of them are therefore little ſatisfactory. Some ſay mercury acts by its metallic weight, others by its aſtringent quality, others by its power of promoting all kinds of excretions, and ſo on. If thoſe writers had only conſidered, that ſometimes two or three grains of mercury brought into the maſs, make the moſt violent venereal ſymptoms diſappear, I think they would have never had recourſe to ſuch an explication. Perhaps, if there was an opinion to be advanced about this matter, chimiſtry could afford us a more reaſonable and ſatisfactory theory, by ſuppoſing that mercury has a peculiar attractive power, or what is commonly called *a chemical affinity*, to the venereal poiſon, by means of which, wherever it meets with that poiſon, it readily unites, and forms a kind of compound with it, which now has no longer any of the qualities which either of the ſubſtances had before the union; and therefore the effect produced by the poiſon muſt, in the moment that union takes place, unavoidably ceaſe, and the patient find himſelf either relieved, or, if the poiſon has been ſaturated with a ſufficient quantity of mercury, be radically cured. By this theory we would perhaps be more able not only to account for a few grains of mercury relieving ſometimes the moſt excruciating venereal pains of the bones, but alſo why mercury

cury taken internally removes venereal ulcers, without any external application, &c. It would further ſeem probable from theſe effects, that mercury has a greater chemical attraction to the venereal poiſon, than it has to any acid; and that, given in any of its ſaline preparations, wherever it meets with that poiſon, it leaves immediately the acid with which it was combined, and unites with the poiſon. I could ſupport this opinion, perhaps, if I added, that mercury cures the venereal diſeaſe the eaſier and ſooner the more minutely it is divided; that, in order to produce the deſired effect, it is always neceſſary that it be abſorbed into the maſs; but that it never cures the venereal complaints though abſorbed into the maſs, if not carried in ſufficient quantity to the place or part affected. In this manner we could perhaps eaſier explain why it often cures the venereal diſorder without any ſenſible increaſe of any of the different ſecretions or excretions of the body; and why, if it produces purging, immoderate ſweating, or ſalivation, it very often leaves the venereal diſeaſe uncured behind. But though we could thus reſolve all theſe different queſtions in a more ſatisfactory manner, I muſt confeſs that this theory is as little as the former founded on any real fact, but on mere conjectures; and therefore, as long as it remains in this ſtate, it is equally uſeleſs as all other hypotheſes in the practice of phyſic, where it may be ſufficient for us to know the ſpecific remedy to cure the diſorder, without being acquainted how it produces its effects, though ſuch

a knowledge, could it be attained, would lead undoubtedly to great improvements in curing thoſe complaints*.

Method of Cure.

If the patient be ſtrong enough to bear the immediate uſe of mercury, I begin generally by giving him a purgative; and the next day I let him bathe in a warm bath, made of a decoction of bran, or of ſimple ſoft water. In this bath, the warmth of which ſhould be determined by the agreeable feeling of the patient, he ought to ſit for half an hour or an hour's time; during the latter end of which time, he may be rubbed gently all over with a fleſh-bruſh, or a piece of flannel. Coming out of the bath he may take a glaſs of good wine, if his circumſtances will admit it, and then go to bed. By theſe means the ſkin will be well cleanſed, and be better fitted for tranſmitting the perſpiration. If he is plethoric, or accuſtomed to bleeding, veneſection may be proper and uſeful, previous to his beginning the uſe of mercury.

With regard to the ſeveral mercurial preparations, I ſhall ſpeak hereafter. We ſhould only be careful and attentive to obſerve whether the mercurial courſe agrees, at firſt, with the patient; and if it does not agree, without heſitation change it. Thoſe patients who will not bear frictions, bear ſometimes

* Thoſe of my readers who wiſh to be more fully inſtructed about the operation and uſe of mercury, I muſt refer to Dr Duncan's Obſervations on the ſubject, publiſhed at Edinburgh.

ſometimes very readily the internal uſe of crude mercury or its ſaline preparations, and *vice verſa*. Others who will not bear mercury internally, will bear the friƈtions, or ſometimes will not bear one mercurial preparation, while they bear another. Some will bear them more eaſily in pills, others in powder, or diſſolved in ſome liquid. To thoſe whoſe conſtitution circumſtances or choice are againſt mercurial friƈtions, we may give Plenck's ſolution of mercury in gum arabic, made into pills: they agree with moſt ſtomachs, even ſuch as ſometimes can bear no other mercurial preparation; or, according to circumſtances, crude mercury ſubdued with conſerve of roſes, or conſerva cardiaca, *calomel* prepared according to Mr *Scheele*'s direƈtion, and the hydragyrum nitratum cinereum, or *pulvis mercurii cinereus* of the new Edinburgh Pharmacopœia, are the mildeſt and perhaps moſt ſuitable preparations for thoſe ſtomachs which are not able to bear any other ſaline mercurial preparation. Mercury rubbed down with ſugar-candy, or calcined mercury mixed with opium, may ſometimes, according to circumſtances, be very advantageous; but, as I have mentioned before, great judgment and attention are required in adminiſtering thoſe medicines, as well as with regard to diet, bathing, &c. which it is impoſſible to enter into a minute detail of any particular circumſtance. The following rules, however, beſides thoſe to be mentioned below under the head of *Mercurial Preparations*, may ſerve as general ones.

The patient whom we undertake to cure of the

lues, muſt have ſufficient ſtrength to bear the uſe of mercury; and neither be affected with any nervous, putrid, hectic, or inflammatory fever, nor with ſea-ſcurvy, or cancerous complaints, or gangrenous ulcers. In all theſe caſes, I have conſtantly obſerved mercury not only prove hurtful, but in ſome inſtances, where its uſe was inſiſted upon, even fatal to the patient. Thoſe diſorders, if poſſible, ſhould therefore be previouſly removed; or if the venereal ſymptoms prevail ſo much, that they make the immediate uſe of mercury indiſpenſably neceſſary, proper medicines ought to be conjoined with mercury.

For reſtoring a proper degree of ſtrength and vigour, an healthful country air is one of the firſt requiſites; then aſſes or cows milk as it comes from the animal; or, what in ſome inſtances I have found far better for patients in eaſy circumſtances, a ſtrong healthy country wet-nurſe, whom the patient may ſuck himſelf; or if he finds this diſagreeable, (or too dangerous), the breaſt of the woman may be drawn with a proper inſtrument, and the patient ſhould drink the milk immediately: this milk is the greateſt ſtrengthener I know of, for debilitated patients. His diet may otherwiſe conſiſt of light puddings; tender meat of middle-aged animals of all kinds, not too fat, eſpecially roaſted; and at dinner, if he likes good ſtrong beer (or porter), he may drink it; otherwiſe a few glaſſes of good and genuine Spaniſh or Hungarian wine will be uſeful. Moderate exerciſe of any kind, and occaſionally frictions of the whole body, will greatly aſſiſt the above

above regimen. As for medicines, he ſhould in general take none; or, if their uſe ſhould be abſolutely neceſſary, or if the patient deſires any, ſmall doſes of the beſt Peruvian bark, finely powdered in ſubſtance, or mixed with genuine old hock, I have found excellent. If the patient be very low, a tincture made of iron diſſolved in vitriolic æther, I have found ſuperior to any other medicine. The cold bath will be ſometimes uſeful, but at other times very improper. This, with cheerful company, and avoiding venery or nocturnal pollutions, will greatly contribute to recover the ſtrength neceſſary for enabling the patient to bear the uſe of mercury. I ſhall, however, make one remark more here, which, as far as I know, has not been taken notice of by any former writer on this ſubject, that weakneſs, low-ſpiritedneſs, and anaphrodyſia, are ſometimes the immediate effects of the venereal virus lurking in the body, and in that caſe I have found mercury to be the beſt ſtrengthener; I have ſeen people in that ſtate gain ſo much ſtrength in eight or ten days, from the internal uſe of mercury, that they were moſt agreeably ſurpriſed.

During the uſe of mercury, a mixed diet of vegetables and animals, as the moſt natural to mankind, is proper; avoiding fat, hard, indigeſtible food. Acids will ſometimes cauſe a griping or purging, under a courſe of mercury: where that happens, they ſhould be avoided. At table, the moderate uſe of wine cannot be hurtful. As to porter, or any other kind of beer, it does not agree with all ſtomachs under a mercurial courſe; where it does, I ſee no reaſon why it may

not be moderately indulged, and I never ſaw in thoſe circumſtances any harm from it. But what I principally inſiſt upon, is, that the patient ſhould go early to bed: indulging ſleep is rather ſerviceable during a mercurial courſe. Moderate exerciſe on foot, in a chaiſe, or on horſeback, if the air be warm and dry, I found always more uſeful, than to confine him to his room. But if the weather be moiſt or very cold, it will be ſafer to ſtay at home. Night air is particularly dangerous; for it is in general cold and damp, and ſhould be therefore, by every patient under a mercurial courſe, moſt carefully avoided. I have known ſeveral inſtances, where venereal patients, during the uſe of mercury, through inattention to this point, have ruined their health and conſtitution for many years, or even for life. Where the patient's buſineſs or circumſtances of life abſolutely oblige him to go out in very cold or damp weather, he ſhould never do it without being warm cloathed, and wearing a flannel or callicoe waiſtcoat under his ſhirt, and a pair of good warm woollen ſtockings.

Thus we proceed with the uſe of mercury, if no peculiar ſymptoms prevent it: let the patient bathe once or twice a-week in a warm bath, if his conſtitution is ſtrong enough; weak and relaxed habits will not admit of this. But whenever he perceives a nauſeous taſte in the mouth like copper, ſtinking breath, ſwelling of the gums, the teeth feeling as if they were ſet on edge, a larger ſecretion of ſaliva or ſpitting than common, mercury ſhould be immediately left off for ſome days,

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a warm bath and friction with the flesh-brush to be used, a gentle physic to be taken and occasionally repeated, and cold moist air in those circumstances to be most carefully avoided. If under the use of mercury symptoms of a general irritation appear, it ought to be left off for some days, and a dose of opium to be given in its stead: but if symptoms of an inflammatory diathesis prevail, bleeding will be previously necessary. Thus we continue with the use of mercury, as I said above, till the virus is wholly eradicated, which will be in twenty-five or thirty days, if the disease has not been of long standing, and the symptoms have not been very severe; but if the disease be inveterate, and the skin or bones severely affected, ten or twelve weeks will be sometimes necessary to produce a complete and radical cure.

To know whether the lues is radically cured, is a nice point of practical judgment; and if I say, that, from a carelessness on the part of the patient, or from want of knowledge on the part of the practitioner, with regard to this point, a great many patients are unhappy, and sufferers, I advance nothing but what we see daily confirmed. If we were in possession of a remedy, which, having the power of rendering the least particle of the venereal virus concealed in the body active, and thus enable us to discover its presence, like as the loadstone discovers the presence of iron, there would be nothing necessary, but to administer that remedy the moment we think the patient had taken mercury enough.

I have made ſome experiments on this ſubject; and I have great reaſon to believe, that the concluſion drawn from them will be ſatisfactory: but as I have not yet a ſufficient number of authenticated facts to form ſuch a concluſion, it would be premature in me now to ſay more on this ſubject.

As ſoon as the mercury affects the mouth of the patient, we are ſure of the moſt eſſential point, viz. of its having entered the maſs, which is abſolutely neceſſary for eradicating the poiſon lodged there. The diſappearing of internal venereal ſymptoms, and more ſo that of the external ones is another, not unequivocal ſign, that the mercury has exerted its action upon the venereal virus. If venereal ulcers which aroſe from an infected maſs begin to mend or heal, if pains or tophuſes of the bones begin to diſappear, &c. under the uſe of mercury, we are ſure of its having removed the effects of the venereal poiſon; but we are not yet ſure of its having eradicated entirely every particle of that poiſon preſent in the body. For this purpoſe, we ought to continue the ſame uſe of mercury for a fortnight or three weeks after all the venereal ſymptoms have entirely diſappeared, and then we may be generally pretty confident that our patient is radically cured of the diſorder.—I have obſerved in ſeveral patients who bore the internal uſe of mercury extremely well, as long as the diſeaſe took place; whereas, on the moment the poiſon was eradicated, they began to nauſeate it, which proved to be the ſtandard of their being radically cured.

But we muſt carefully remark, that though the venereal

venereal poiſon had been perfectly eradicated from the maſs, and therefore the venereal diſeaſe been radically cured, there occur many inſtances in practice, where exoſtoſes, knots, or ſwellings of the bones, owing their origin to the venereal poiſon continue, however, all the life through, without any bad conſequences; a caries of the bones will often remain, till nature herſelf or aſſiſted by art has made the exfoliation. Venereal excreſcences remaining after a mercurial courſe are to be looked upon as local complaints, and to be removed by local remedies. It has been a general obſervation, and I have ſeen it confirmed in ſeveral inſtances, that the venereal diſeaſe yields eaſier to a good treatment in warm and dry climates and ſeaſons, than in cold and damp ones. This is the real reaſon that has rendered Montpelier ſo famous for curing the moſt obſtinate and confirmed lues. This is likewiſe the reaſon that people, who are not cured of venereal complaints at Peterſburgh, or Stockholm, &c. are ſometimes cured when they go to Italy or Portugal; and for the ſame reaſon, they can bear ſometimes mercury there without the leaſt inconvenience, till they are perfectly cured, when they could ſcarcely bear a few grains of it in cold or wet countries, without falling into an immediate ſalivation. I have ſeen ſeveral ſtriking inſtances of this kind. This does not ariſe from peculiar balſamic particles in the air of the ſouth of France, Italy, or Portugal; nor from any particular or ſuperior ſkill of the phyſicians at Montpelier, above thoſe of London, Stockholm, &c. as the patients often wrongly ſuppoſe; but merely be-

cauſe the atmoſphere is dry and warm, and ſometimes becauſe the formerly neglectful patient becomes now more careful, and pays more exact attention to the advice of his phyſician and ſurgeon. A ſkilful phyſician, however, will be able to put his patient, in any country whatſoever, in a ſituation which he finds neceſſary for curing this complaint, by putting him for ſome weeks or months in an artificial climate as adequate and effectual for him as the natural warm climate of Montpelier, Naples, or Liſbon.—One other circumſtance to be attended to is, that patients under a mercurial courſe ſhould be told of the effects of mercury on gold; ſuch as rings, lace, watches, &c. By not attending to this particular, diſagreeable diſcoveries may ſometimes be made, which female patients eſpecially have reaſon to avoid.

CHAP.

CHAP. XII.

On MERCURIAL PREPARATIONS *in general.*

BEFORE I enter into the conſideration of the different mercurial preparations the reader will perhaps be pleaſed to ſee a ſynoptical view of all thoſe preparations and compounds of mercury hitherto invented. I therefore ſubjoin the following Table:

TABLE of all the different MERCURIAL PREPARATIONS and COMPOSITIONS hitherto known.

I. PREPARATION where the Mercury is ſimply purified.

* *Hydrargyrum purificatum.*

Mercurius crudus purificatus *officinarum.*
Argentum vivum purificatum. *Pharm. London.*
Anglis, Quickſilver, crude purified mercury; *Germanis*, Reines queckſilber; *Gallis*, Mercure pure.

II. PRE-

II. Preparations in which the Mercury is only divided.

1. By gums or mucilages; ſuch as gum arabic, tragacanth, &c.

* *Hydrargyrum gummoſum.*

Mercurius gummoſus of *Plenck* (the inventor).

Composita.

* *Pilulæ ex hydrargyro gummoſo.*

Pilulæ ex mercurio gummoſo. *Plenck. Pharm. Chir.*
Solutio mercurialis gummoſa. *Ibid.*
Mixtura mercurialis. *Pharm. Noſcom. Sti Georgii.*
Potio mercurialis. *Diſpenſatorii Novi Brunſuicenſis.*
Lac mercuriale. *Plenck.*
* *Syrupus hydrargyri. Pharmac. Suec.*

2. By reſins or balſams; ſuch as turpentine, balſamum copaiva, &c.

* *Hydrargyrum terebinthinatum,* &c.

Composita.

* *Pilulæ ex hydrargyro terebinthinato.*

Pilulæ mercuriales. *L.*
Pilulæ mercuriales laxantes. *G.*
Pilulæ mercuriales ſialagogæ. *Pharm. Danic.*
Injectio mercurialis. *Pharm. Edinb. pauperum.*

3. By ſuet or vegetable oils; ſuch as hog's-lard, gooſe-fat, or butter of cocoa nuts.

* *Hydrargyrum unguinoſum.*

* *Unguentum hydrargyri.*

Unguentum ex hydrargyro cæruleum. *E.*
Unguentum mercuriale, ſeu unguentum Neapolitanum. *Pharmac. Auſtriaco-Provincialis.*

Composita.

℞ Unguentum cæruleum fortius. *L.*
Unguentum cæruleum mitius. *L.*
Unguentum mercuriale. *D.*
℔ Ceratum mercuriale. *L.*

Emplaſtrum

γ Emplaſtrum mercuriale. *O.*
Emplaſtrum ex hydrargyro. *E.*
Emplaſtrum ex gummi ammoniaco cum mercurio. *L.*
Emplaſtrum commune cum mercurio. *L.*
Emplaſtrum de ranis cum mercurio. *A.*

4. By calcareous earth; ſuch as chalk, chelæ cancrorum, &c.

Mercurius alkaliſatus. *E.*
Pulvis mercurialis. *G.*

III. PREPARATIONS where the Mercury is calcined by heat and air.

* *Hydrargyrum calcinatum.*

Mercurius calcinatus. *L. S.*
Mercurius præcipitatus per ſe. *L.*

COMPOSITA.

* *Pilulæ ex hydrargyro calcinato.*

Pilulæ ſyphiliticæ. *Pharm. Noſoc. Sti Thomæ.*
Pilulæ ex mercurio calcinato. *G.*
Pilulæ ex mercurio calcinato anodynæ. *G.*

IV. PREPARATIONS where the mercury is partly divided and partly diſſolved.

1. By ſugar-candy, or ſaccharine compoſitions; ſuch as conſerva roſarum, cynoſbati, &c.

* *Saccharum hydrargyratum.*

COMPOSITA.

* *Bolus ex hydrargyro ſaccharato.*

Bolus cœruleus. *Th.*
Bolus mercurialis. *G.*

2. By honey.

* *Mel hydrargyratum.*

COMPOSITA.

Pilulæ Æthiopicæ. *E.*
Pilulæ mercuriales purgantes. *E. Paup.*
Pilulæ Belloſti.

3. Mer-

3. Mercury combined with ſulphur, (flowers of brimſtone).

* *Hydrargyrum ſulphuratum.*

a. By a ſimple trituration or fuſion.

* *Hydrargyrum ſulphuratum nigrum.*
Æthiops mineralis. *O.*

COMPOSITA.
Pulvis Æthiopicus. *G.*

b. By ſublimation.

* *Hydrargyrum ſulphuratum rubrum.*
Cinnabaris factitia, ſeu artificialis. ☿.

COMPOSITA.
Pulvis antilyſſus Sinenſis. *O.*

4. Mercury combined with ſulphur of antimony.

a. By ſimple trituration.

* *Sulphur antimonii hydrargyratum nigrum.*
Æthiops antimonialis. *O.*

COMPOSITA.
Pilulæ Æthiopicæ. *E. D.*

b. By ſublimation.

Sulphur antimonii hydrargyratum rubrum.
Cinnabaris antimonii. *O.*

COMPOSITA.
Bolus Cinnabarinus. *G.*

5. Mercury combined with ſulphur by precipitation.

[See below under the *Preparations with the Acid of Vitriol.*]

V. PREPARATIONS where the mercury is reduced to the form of a metallic ſalt or calx, by acids.

1. Acid of ſuet. 2. Acid of common ſalt. 3. Acid of ſugar. 4. Acid of amber. 5. Acid of arſenic. 6. Acid of wood-ſorrel. 7. Acid of phoſphorus. 8. Acid of vitriol. 9. Acid of ſugar of milk. 10. Acid of tartar.

11. A-

11. Acid of citron or lemon. 12. Acid of nitre. 13. Acid of fluor mineral. 14. Acid of vinegar. 15. Acid of borax. 16. Acid of Berlin blue. 17. Aërial acid.

1. Mercury combined with acid of ſuet (acidum ſebi.)

Hydrargyrum ſebinum.

2. Mercury combined with the muriatic acid; or acid of common ſalt.

* a. *Hydrargyrum muriatum.*

* *Hydrargyrum muriatum fortius* { By ſublimation, or by precipitation

Mercurius ſublimatus corroſivus. *O.*
Mercurius ſublimatus albus. *O.*
Mercurius corroſivus albus. *S. L.*
Mercurius corroſivus via humida paratus. *Monnet.*

COMPOSITA.

Solutio ſublimati ſpirituoſa of *Van Swieten.*
Solutio mercurii ſublimati corroſivi. *E.*
Mixtura Mercurialis. *S.*
Mercurius ſublimatus ſolutus. *G.*

* *Solutio hydrargyri ſaliti fortioris aquoſa.*
Pilulæ e mercurio corroſivo albo. *S.*

* *Lotio ſyphilitica flava, (lotio ex hydrargyro muriato fortiori.)*
Aqua phagedænica. *O.*
Liquor mercurialis. *A.*
Lotio mercurialis. *Th.*
Solutio ſublimati balſamica. *Plenck.*

* *Liquor ad condylomata.*
Aqua coſtica pro condylomatibus. *Plenck.*

b. *Calx hydrargyri muriata*; i. e. the calx of mercury united with ſome muriatic acid.

By ſublimation.

* *Hydrargyrum muriatum mitius.*
Mercurius dulcis (ſublimatione paratus). *O.*
Mercurius dulcis ſublimatus. *L.*
Calomel ſeu calomelas. *L.*
Aquila alba.
Panacea mercurialis.
Mercurius dulcis lugaris. *Schroeder.*

COM-

COMPOSITA.

Bolus mercurialis. *E.*
Bolus jalappæ cum mercurio. *Ibid.*
Bolus rhei cum mercurio. *Ibid.*
Pilulæ calomelanos. *G.*
Pilulæ Plummeri. *E.*
Pilulæ alterantes Plummeri. *O.*
Pilula depurans. *Th.*
Pulvis Plummeri. *O.*
Pilulæ mercuriales purgantes. *A.*
Pilulæ catarrhales purgantes. *D.*
Pilulæ laxantes cum mercurio. *Ibid.*
Pulvis e ſcammonio cum mercurio. *Th.*
* *Lotio ſyphilitica nigra, (lotio ex hydrargyro muriato mitiori.)*
Lotio mercurialis. *G.*

By precipitation.

a. From its ſolution in nitrous acid by common ſalt.

* *Calx hydrargyri muriata Scheelii.*
Mercurius præcipitatus dulcis of *Scheele*, (the inventor).

b. From its ſolution in muriatic acid by vegetable alkali.
Mercurius præcipitatus albus. *L.*

c. From its ſolution in muriatic acid by mineral alkali.
Mercurius præcipitatus albus. *A.*

d. From its ſolution in muriatic acid by volatile alkali.
Mercurius præcipitatus albus. *E.*

e. From its ſolution in muriatic acid by copper.
Mercurius præcipitatus viridis. *E.*

f. Dr *Ward*'s *white drop*, or mercury precipitated from its ſolution in nitrous acid and rediſſolved by ſal ammoniac.

COMPOSITA.

Unguentum e mercurio præcipitato. *L.*
Linimentum mercuriale. *E. Paup.*

3. With the acid of ſugar.
Hydrargyrum ſaccharatum. *Bergman.*

4. With the acid of amber.
Hydrargyrum ſuccinatum. *Bergman.*

5. With the acid of arſenic.
Hydrargyrum arſenicatum. *Bergman.*

6. With

6. With the acid of wood-ſorrel, (oxalis acetoſella Linnæi).

Hydrargyrum oxalinum. *Bergman.*

7. With phoſphoric acid.

Hydrargyrum phoſphoratum. *Bergman.*

By precipitation from its ſolution in the nitrous acid by recent urine.

Roſa mineralis. *O.*

8. With the vitriolic acid.

* a *Hydrargyrum vitriolatum.*

Vitriolum mercurii. *O.*
Oleum mercurii. *O.*

b. *Calx hydrargyri vitriolata (flava).*

Turpethum minerale. *O.*
Mercurius emeticus flavus. *L.*
Mercurius flavus. *L.*
Mercurius præcipitatus luteus. *D.*
Turpethum nigrum. *O.*

c. Mercury precipitated from its ſolution in nitrous acid by hepar ſulphuris or hepar calcis.

Mercurius præcipitatus niger. *O.*

9. With the acid of ſugar of milk.

10. With the acid of tartar.

a. Hydrargyrum tartariſatum. *Bergman.*

b. With purified tartar, commonly called *cream of tartar*, (*viz. alkali ſuperſaturated with the acid of tartar.*)

* *Tartarus hydrargyratus.*

Terre feuilletee mercurielle of Dr *Preſſavin*, (the inventor.)

c. Mercury precipitated from its ſolution in nitrous acid by the acid of tartar.

* *Calx hydrargyri tartariſata flava*; *vulgo*, Pulvis Conſtantinus.

d. Mercury precipitated from its ſolution in muriatic and tartarous acid by fixed vegetable alkali.

* *Calx hydrargyri tartariſata alba*; *vulgo*, Pulvis argenteus.

9. With

11. With the acid of citron.

Hydrargyrum citratum. *Bergman.*

12. With the acid of nitre.

* *Hydrargyrum nitratum.*

A. Simply diſſolved.

* *Acidum nitri hydrargyratum.*

Solutio mercurii. *E.*

COMPOSITA.

Unguentum citrinum. *E. A. S.*

B. Evaporated and calcined by fire.

* *Calx hydrargyri nitrati rubra.*

Mercurius corroſivus ruber. *L. E.*
Mercurius præcipitatus ruber. *O.*
Pulvis principis. *O.*
Mercurius corallinus. *L.*
Mercurius tricolor. *O.*
Panacea mercurii. *O. O.*
Arcanum corallinum.
Panacea mercurii rubra. *O.*

COMPOSITA.

Balſamus mercurialis. *Plenck.*
Unguentum ophthalmicum. *St Yves.*
Balſamum ophthalmicum rubrum. *D.*
Unguentum præcipitatum. *G.*
Unguentum ad lippitudinem. *Th.*
Unguentum mercuriale rubrum. *D.*
Unguentum pomatum rubrum. *D.*

C. Precipitated from its ſolution in nitrous acid.

a. By volatile alkali.

* *Hydrargyrum nitratum cinereum.*

Pulvis mercurii cinereus. *E.*
Turpethum album. *O.*
Mercurius præcipitatus dulcis. *O.*

COMPOSITA.

Vegetable ſyrup.
Syrup de *Bellet.*

b. By

b. By vinous volatile alkali, (ſpiritus ſalis ammoniaci vinoſus).
Turpethum nigrum.
Mercurius præcipitatus niger.

c. By fixt vegetable alkali.
Mercurius præcipitatus fuſcus. *Wurtz.*

d. By copper.
Mercurius præcipitatus viridis. *B.*

13. With the acid of ſpar, (fluor mineralis.)
Hydrargyrum fluoratum. *Bergman.*

14. With the acid of vinegar.
* Hydrargyrum acetatum. *Bergman.*

COMPOSITA.

Troches or pills of *Keyſer.*

15. With the acid of borax.
Hydrargyrum boraxatum. *Bergman.*

16. With the acid of Berlin blue.

17. With the aërial acid, (fixt air).
Hydrargyrum aëratum. *Bergman.*

MOST of the different mercurial preparations mentioned in the foregoing table, have been recommended at different times, by different chemiſts and practitioners, for curing the venereal diſeaſe. We ſhall confine ourſelves to the conſideration of thoſe marked with an aſteriſk, ſince they are principally employed now, which have either maintained their reputation from their firſt introduction into practice, or which were diſcovered in our times, and ſeem to poſſeſs ſuch qualities as will entitle them to the ſame predicament.

They are ſhortly as follow.

Mercury in its crude ſtate rubbed down, or, as it is commonly called, *extinguiſhed* or *killed*, with fat or oils, with gum arabic, turpentine, conſerve of roſes, &c.—In a more diſſolved ſtate triturated with ſugar-candy, which I think properly called *ſaccharum hydragyratum*.—United with ſulphur under the name of *cinnabar*, for fumigations.—The metal calcined by itſelf, and thence called *hydrargyrum calcinatum*.

Mercury diſſolved by different acids, and united with them into a metallic ſalt, or precipitated from them in the form of a more or leſs acrid calx. Such,

With the muriatic acid: The corroſive ſublimate, which I gave in the table the more adequate name of *hydrargyrum muriatum fortius*, in order to diſtinguiſh it as well from calomel or mercurius dulcis, which I called *hydrargyrum muriatum mitius*; as from the mercurius dulcis prepared by precipitation, according to the invention of Mr Scheele, which I named *calx hydrargyri muriata Scheelii*.

With the acid of vitriol: The turpeth mineral, or mercurius emeticus, or præcipitatus flavus, (*calx hydrargyri vitriolata*).

With the acid of tartar: The *hydrargyrum tartariſatum*, which ought to be diſtinguiſhed from what I call the *Tartarus hydrargyratus*, or *terre feuilletee mercurielle* of Dr Preſſavin of Paris, which is a combination of mercury with purified tartar, (*cream of tartar*).

With the acid of nitre: The *hydrargyrum nitratum*

tratum in a diluted ſimple ſolution, or in a more ſolid form, as in the *ſyrup de Bellet* and *unguentum citrinum*. The *pulvis mercurii cinereus* of the new Edinburgh Pharmacopœia; where the mercury diſſolved in nitrous acid is precipitated by volatile alkali, however, not quite deprived of the acid, and therefore properly called *hydrargyrum nitratum cinereum*. Dr Ward's white drop, where the mercury diſſolved in the ſame acid is precipitated and rediſſolved by means of ſal ammoniac. The *hydrargyrum nitratum rubrum*, improperly called *red precipitate*, where the metal, after being diſſolved in this acid, is expoſed to a certain degree of fire, whereby it acquires the colour. And laſtly,

With the acid of vinegar: *Hydrargyrum acetatum*, known under the name of *Keyſer's pills*, or *troches*; where the mercury after having undergone a long-continued trituration, is thereby fitted to unite with this acid.

All theſe different preparations are applied in various forms, ſuch as powders, pills, boluſes, ſolutions, lotions, injections, ointments, &c. ſome of them for external, but by far the greateſt number for internal uſe. In general, it is to be obſerved, that all ſaline mercurial preparations are the ſafer and better the more finely they are levigated.

CHAP. XIII.

On MERCURIAL PREPARATIONS *in particular.*

I. On MERCURIAL FRICTIONS.

OF all the different methods hitherto diſcovered for curing the venereal diſeaſe, that by mercurial frictions is perhaps the moſt efficacious, as well as the ſafeſt and mildeſt. The application of mercury in this way, however, as indeed the uſe of mercurials in general, requires often conſiderable ſkill and attention on the part of the practitioner, as well as a very ſtrict compliance and obſervation of regimen on that of the patient, in order to produce the deſired effect in the ſpeedieſt manner.—Such is the difference of conſtitutions, that ſome perſons will be more affected by a few frictions than others, ſeemingly in the very ſame circumſtances, by twenty or thirty: and if more mercury is rubbed on the former with a view to increaſe the effect, inſtead of this, we run the riſk of bringing on very diſagreeable ſymptoms, ſuch as ſalivation, vertigo, feveriſh heat, trembling of the extremities, and chronic violent pains in the articulations.

When

When frictions have their proper effect, the uſe of them is not attended with any bad ſymptoms; the patient is eaſily cured without ſuffering much in the time, or without finding himſelf much weakened afterwards.—Moſt people have their ſymptoms in ſome meaſure relieved by four or ſix frictions; though ſometimes fourteen or fifteen are required to produce this effect.

The mercury employed for this purpoſe ought to be very pure; and as practitioners cannot be aſſured of the purity of what is ſold in the ſhops, they ought to purify it themſelves. Moſt of our mercury comes from Idria, and paſſes through the hands of the Dutch, by whom it is not unfrequently adulterated with heterogeneous ſubſtances, without any diminution of its fluidity or metallic ſplendor: but no phyſician who has the ſafety of his patient at heart ought ever to employ quickſilver, either externally or internally, without a certainty of its being perfectly pure; for, by making uſe of the metal in an impure ſtate, he may not only be diſappointed in the effects he expected, but it may prove hurtful to the patient.

This being the caſe, the reader, I hope, will excuſe the following digreſſion.

Remarks upon the Adulteration and Purification of Mercury.

Quickſilver is found in mines, either native, in which ſtate it is called *mercurius virgineus;* or mi-

neraliſed, when it obtains the name of ore, from which it is afterwards ſeparated by diſtillation.

The ores of mercury are of different kinds and forms. The native cinnabar, however, is the kind which contains the greateſt quantity of quickſilver. Although many recommend the native cinnabar for a remedy, it is a matter of fact, that it is often impure from admixed heterogeneous particles. It is, therefore, running a riſk to employ native cinnabar, eſpecially for internal uſe. Though it is ſometimes more beautiful in its colour than the artificial, we may always depend with more ſafety upon the latter, if it be only well prepared.

The mercury being in the cinnabar, or other ores of mercury, generally mineraliſed by ſulphur, or at leaſt concealed under it, the proceſs to ſeparate it from the ſulphur conſiſts herein, that a ſubſtance be united with mercurial ores which has a greater affinity with the ſulphur than with mercury; ſuch ſubſtances, for example, are alkaline ſalts, calcareous earth, iron, ſcoria ferri, &c. If, therefore, one or other of the juſt mentioned ſubſtances (of which, however, always the cheapeſt is choſen) be mixed with the ore of mercury, and expoſed to diſtillation, this ſubſtance will unite with the ſulphur, and the quickſilver, being thereby ſet at liberty, will go over, in its metallic ſtate, in the form of vapours into the recipient.

A bad cuſtom has, alas! ariſen from intereſted motives, viz. to adulterate mercury with lead, with which it readily unites. This adulteration

is

is accompliſhed the more eaſily, if combined with ſome biſmuth; becauſe the amalgam thus produced is much more fluid, and retains much better the metallic ſilvery ſplendor of mercury. It is thence evident, that the colour and ſplendor of quickſilver are not always certain characteriſtics of its purity; and the purification of mercury, by preſſing it through a leather bag, is by no means to be depended upon, becauſe the amalgam made of quickſilver, lead, and biſmuth, is often ſo perfect, that though even the fourth part of the whole maſs conſiſts of lead and biſmuth, very little however of theſe heterogeneous ſubſtances will remain behind in the leather bag.

The only ſure means to purify quickſilver is diſtillation; for which purpoſe, ſome think, iron veſſels are beſt fitted, iron being the only metal whoſe union mercury refuſes, and there being no fear that iron veſſels are deſtroyed by the proceſs as there is with regard to thoſe made of glaſs. To make uſe of iron veſſels is the more adviſable, becauſe the mercury expands very much during the operation, by which means glaſs veſſels are eaſily broken. The higher mercury may be driven before it deſcends again, the better it is, becauſe by theſe means the particles of lead cannot ſo eaſily be carried with it. The veſſel for this operation may be an iron pot, with a long iron neck like the barrel of a muſket. But in order to condenſe the better and eaſier, the mercury riſing in the form of vapours, the end of that tube bended downwards, ſhould be immerſed in vinegar one or two inches deep. All the mercury is, by

this method, not only obtained without loſs, and the operator is expoſed to no danger, but the riſing mercury will be alſo perfectly freed and purified from all particles of lead and biſmuth which might poſſibly have gone over with it, the quickſilver being inſoluble in it. The characters, therefore, of pure quickſilver, are: 1. That it forms globules when poured upon wood, which always retain a ſpherical form, and never are drawn into length like a thread or line. 2. That it be not covered with a cuticle, but be ſhining. 3. That when rubbed with water, the water become blackiſh or foul. 4. Vinegar rubbed or digeſted with it, ſhould not acquire a ſweet taſte. 5. Put in an iron ſpoon over the fire, it muſt evaporate entirely without leaving any thing behind.

The mercurial ointment is generally prepared by extinguiſhing, or, as it is commonly called, *killing* the mercury with hog's-lard and turpentine. The preparation of the ointment in this manner is very exceptionable, It will ſoon produce, in many perſons whoſe ſkin is tender, puſtles of an inflammatory kind, which are very painful, and prevent the continuation of the frictions.—A more proper method therefore of preparing mercurial ointment for this purpoſe, is by triturating the purified metal with freſh hog's-lard, repeatedly waſhed and cleaned for ſeveral days with pure water, without the addition of any turpentine. The trituration of the ointment muſt be continued for two hours, even after all the globules of mercury have diſappeared, in order to be certain of the moſt perfect diviſion. It

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muſt then be kept in a cold place, not only to avoid its growing rancid, but alſo to prevent its melting, which would produce a ſeparation and ſubſequent precipitation of the metal from the hog's-lard to the bottom of the veſſel.

But, notwithſtanding this precaution, we very often meet with patients whoſe ſkin ſeems to be ſo extremely irritable, that they will not bear the application of the ointment even when prepared according to the method juſt mentioned. The great propenſity of the hog's-lard to grow rancid, eſpecially in hot ſeaſons and warm climates, contributes greatly to occaſion this troubleſome irritability. In ſuch circumſtances it will be proper either to mix with the above ointment, a ſmall quantity of the ointment of liquorice recently prepared, or to prepare the ointment entirely of mercury, and the butyraceous oil obtained from cocoa-nuts by boiling them in water; or to make uſe, inſtead of ointment, of quickſilver divided by the mucilage of gum arabic. Thus, indeed, the proceſs is rendered more troubleſome and expenſive; but the practitioner who wiſhes to render the cure eaſy and agreeable to his patient, will readily ſubmit to inconveniencies of this kind.

By this method we may effectually prevent the pruritus and puſtules proceeding from any of the cauſes abovementioned, eſpecially if at the ſame time the place where the ointment is to be rubbed in be previouſly ſhaved, and too harſh rubbing with the hand in the beginning be avoided. For ſometimes ſuch puſtules ſeem to originate from the hair being violently moved in oppoſite direc-

tions,

tions, which, by theſe means, will be eaſily prevented.

The principal objects after the application of mercurial frictions has been fixed upon, ought to be, *1ſt*, To diſpoſe the place into which the ointment is to be rubbed for the abſorption of the mercury; and, *2dly*, To diſpoſe the ſurface of the body to tranſmit the metal through its pores, after it has produced the deſired effects in the ſyſtem, as ſpeedily as poſſible, and thus prevent ſalivating, purging, or its ſettling in the bones or any of the cavities of the body. For theſe purpoſes, it will be always adviſable to preſcribe, before we begin the frictions, a purgative, and to order the patient to ſit in a warm bath made of ſoft water, and of about 86 degrees of Fahrenheit's thermometer, for the ſpace of half an hour or an hour. After he has been in it for a quarter of an hour, he muſt be rubbed all over with a fleſh-bruſh, or a piece of flannel and ſoap, to clean the ſkin, and adapt it the better to the purpoſes abovementioned. This is to be done, if no particular circumſtance forbids, the day before, or on the very day that the friction is begun; and to be repeated once or twice a-week afterwards, during the whole time he is uſing the frictions.

The ſame evening, or the day after, having made uſe of the warm bath, the patient ſhould begin the friction, rubbing into the outſide or inſide of his thigh or leg, before he goes to bed, a drachm of the mercurial ointment prepared as above directed. The friction is to be performed by the fire-ſide in winter, and the rubbing muſt be conti-

continued gently for half an hour or an hour, till the whole be rubbed in. The part muſt then be covered with a piece of linen faſtened with a bandage; or the patient muſt put on a pair of drawers, or a pair of ſtockings if the friction has been made on the leg. The ſame bandage, &c. may ſerve for the whole time, being applied only to keep the ſhirts and bed-linen from being ſullied and growing black from the ointment.—Before each new operation, the greaſe and blackneſs ought to be well cleanſed or waſhed off with ſoap and warm water. The friction is beſt made by the patient with his own hand, but to fat people, or the female ſex, this operation may prove tireſome, in which caſe a ſervant ſhould be inſtructed how to do it, putting on a glove made of a ſoft hog's bladder or oil-ſkin. I would not adviſe any perſon to perform this operation for another without putting on ſuch a glove, becauſe I have ſeen inſtances of a ſalivation being brought on in ſome aſſiſtants by rubbing in the mercurial ointment with their naked hand. Beſides, we cannot be certain how much ointment is rubbed into the patient, when part of it is abſorbed into the ſervant's hand.

After the firſt friction, we muſt attentively obſerve whether the mercury occaſions any irregularity in the body; and if it does, it muſt be omitted for two days, care being taken to obſerve the ſame regimen, that the patient is well cloathed, and that he keep within doors, eſpecially in a cold ſeaſon or cold climate.

If, after two days, the patient ſhould perceive no diſagreeable ſymptoms, the ſecond friction muſt

muſt be made in the ſame manner as the firſt. The next day he muſt leave it off again; and if he then finds no ill effects from it, the frictions may be continued every day, either morning or evening, without intermiſſion, unleſs ſome accident intervene. However, the place of rubbing muſt be changed every day, or every other day, in order to avoid irritating the ſkin, and to prevent puſtules ariſing upon it. If, after five or ſix frictions, we find that the patient's conſtitution will bear the mercury, and that he has no fever, diarrhœa, ſalivation, or immoderate ſweating, we may rub in at every friction two drachms of the ointment, eſpecially if the ſymptoms be obſtinate.

In this ſituation, when the weather is warm, or indeed unleſs it be ſeverely cold and damp, the patient may go out every day during the frictions, provided he be warmly cloathed, and avoid the cold wind, and eſpecially the night air. But he muſt carefully guard againſt checking perſpiration; and therefore, if the weather is cold and moiſt, he ſhould rather keep at home in a warm room, and ſhun as much as poſſible every inconvenience from cold. In a ſevere ſeaſon he ſhould wear flannel ſtockings and a flannel waiſtcoat, according to circumſtances, either over or under the ſhirt.

During all this time, however, we muſt if poſſible uſe the warm bath, as already directed, once or twice a week; proceeding in this manner, until the patient's health be perfectly reeſtabliſhed, which will be with 30 or 35 frictions,

if

if the ſoft parts only have been affected: but if the diſeaſe has been confirmed, or of a long ſtanding, ſo that the bones are affected, 50, 60, or 70 frictions will be abſolutely neceſſary to make a perfect and radical cure; though this, no doubt, will vary, according to the conſtitution of the patient.

It muſt here be remarked, as an obſervation of great conſequence both to the phyſician and patient, that the ceſſation of the ſymptoms is never to be looked upon as demonſtrating a radical cure. This we ought to tell our patients in the beginning, eſpecially if they be of the female ſex, that to alleviate the pain or abate the ſymptoms of the diſorder, and to deſtroy and eradicate entirely the venereal poiſon from the body, are two very different things. The former may often be accompliſhed in three or four days by a very few frictions; whereas the latter will ſometimes require as many months. The ſame thing will ſometimes happen in this reſpect when we leave off the frictions as ſoon as the ſymptoms diſappear, as when we leave off the Peruvian bark in agues as ſoon as the fever is gone: the fever ſoon returns again, although perhaps with a different type; but continuing the bark for a longer time, we are ſure of a perfect cure, and need not be in the leaſt afraid of a relapſe.

We muſt therefore for the ſafety of our patients continue the uſe of mercury for two or three weeks, or at leaſt ten days, after the ſyphilitic ſymptoms have perfectly diſappeared; but it is here where the practitioner muſt give proof of his judgment and experience.

When

When the patient, during the frictions, or otherwiſe uſing mercury, perceives his gums begin to ſwell, his breath to ſmell diſagreeably, his throat to become painful in the inſide, or when he ſpits oftener than uſual, the uſe of mercury is immediately to be left off, until theſe ſymptoms diſappear, when we may go on with it again: but I think it eligible to go on with the frictions, if the patient can otherwiſe bear them, pretty briſkly, until the mouth be a little affected; becauſe thus we are certain that the frictions have had their proper effect, and that the mercury has been abſorbed into the ſyſtem.

The generality of patients, as has been already mentioned, find ſome relief after a few frictions; but there are ſome, eſpecially thoſe who have the bones affected with tophus, caries, &c. in whom no remiſſion of the ſymptoms takes place till after fourteen or twenty frictions; and ſometimes, in this ſtate of the diſeaſe, ſeventeen ounces of mercurial ointment will be requiſite to make a perfect cure.

In all ſuch caſes we muſt endeavour to make the mercury go off by perſpiration; but profuſe ſweating ought not to be encouraged, leſt it ſhould weaken the patient, or bring on a conſumption, eſpecially in ſuch as are cachectic, or of a thin habit of body. Where we find the body naturally diſpoſed to ſalivation, we ought to be very cautious how we proceed. In this caſe the patient ſhould, eſpecially in bad weather, keep within doors, in a moderate warm room, without being

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too much covered, particularly on his head or neck. The proper temperature of the room in winter is betwixt the 75th and 78th degrees of Fahrenheit's thermometer. But in fine dry weather, I would even adviſe him to go abroad; for I have found, in many inſtances, that the enjoying of pure free air contributes rather to prevent a ſalivation. In warm ſeaſons or climates ſuch precautions are unneceſſary. If the patient be weak, the Peruvian bark may be given with advantage, from a ſcruple to a drachm, in milk or wine, every morning or evening.

By theſe means I have generally ſucceeded in preventing the above mentioned bad effects of the mercury, as profuſe ſweats, ſalivation, and its running off by ſtool: in the firſt caſe it happens much the ſame as when, by an imprudent management, a ſalivation is raiſed; the mercury then, though abſorbed into the ſyſtem, ſeems to run off by the ſalivary glands, as haſtily as it is given, without performing thoſe ſalutary effects in the body, neceſſary for eradicating the venereal poiſon, and perfecting a cure. In the latter, when a purging is occaſioned by medicines of this kind, their abſorption from the inteſtines is prevented, and they do little or nothing againſt the diſeaſe. I have ſeen ſeveral patients treated in this manner, who, after taking mercury for ſix or eight weeks, which kept them all that time in a continual diarrhœa, were nearly in the ſame ſtate at the end of the courſe, as they had been at the beginning.

II. On

II. On Mercurial Fumigations.

I have little to say on this subject. *Mercurial fumigations* are now-a-days no more in use for curing the lues, but prove often a most effectual remedy against local venereal complaints. The cinnabar is for this purpose to be put upon live coals, and the rising smoak to be conveyed by means of a proper tube to the part affected.

III. Of Saline and other Mercurial Preparations.

The *hydrargyrum gummosum*, (or mercurius gummosus), is a mild mercurial preparation, in which the crude metal is divided by means of gum arabic. Mr Plenck, the inventor of this preparation, first prescribed it diluted with water, in the form of a mixture; but this form being found inconvenient on account of the mercury not remaining properly suspended, he proposed, some time ago, to make it into the form of pills. He for this purpose orders, of well purified quicksilver, two drachms, to be triturated with three drachms of powdered gum arabic, and a sufficient quantity of conserve of hips, in a marble mortar, till the mercury has disappeared; then, after continuing the trituration for an hour longer, the mass to be mixed with

with half an ounce of crumb of white bread, and then to be formed into pills of three grains each, of which the patient is to take ſix each morning, and ſix every evening. This form is undoubtedly leſs exceptionable, but ſtill liable to another inconvenience, which is, that theſe pills, like all thoſe made with crumb of bread, when kept for a length of time, grow ſo hard, that they frequently paſs the ſtomach undiſſolved, and are evacuated by ſtool in the ſame globular form they were taken. This objection, indeed, cannot be made to them, if they are prepared freſh every ſecond or third day; and, in that caſe, they will be found a very valuable acquiſition for our pharmacopœia ſyphilitica.—A bolus made from five to ten grains of quickſilver, extinguiſhed by a ſufficient quantity of the conſerve of roſes, or confectio cardiaca, &c. will, according to circumſtances, ſerve for the ſame purpoſe.

Mercury divided by means of ſome balſam, would be a very acceptable and uſeful medicine in different caſes. An attempt of the kind has been made in the pilulæ ex hydrargyro terebinthinato, where one ounce of quickſilver is united with a drachm and a half of turpentine: but beſides that the diviſion is extremely tedious, which indeed might be obviated by adding ſome drops of the oil of turpentine, this compoſition is, like all ſaline mercurial preparations, ſometimes very apt to excite griping and purging, This is undoubtedly owing to the quality of turpentine; the beſt ſort ſhould be choſen for this purpoſe, and, according to circumſtances, inſtead of the turpen-

tine, the balſam of Gilead, or balſamum Canadenſe, united with ſome vegetable powder, might be tried; and thus a pill of five or ſeven grains be given every evening.

The *ſaccharum hydrargyratum*, or quickſilver triturated with twice or three times its weight of ſugar-candy, is, in many inſtances, a moſt excellent medicine, as well for internal as external uſe. Its doſe internally is from four to eight grains a-day, in the form of powders, pills, or troches.

The *hydrargyrum calcinatum*, or calcined mercury, I have conſtantly found to be apt to excite gripings. This may be in ſome reſpect avoided, by giving half a grain of it with a grain of opium every night in the form of a pill.

The *hydrargyrum acetatum*, known by the name of Keyſer's pills or troches, has of late made a great noiſe in France. It has been recommended as the ſafeſt and beſt medicine for curing venereal complaints, even of the moſt obſtinate and inveterate kind, without ever occaſioning a ſalivation, or producing any of thoſe bad ſymptoms which ſometimes attend the uſe of other mercurials. Time and experience, however, have ſhewn that this remedy ſometimes proves ineffectual in removing the complaints, and in many inſtances produced the bad ſymptoms attending other mercurials. Mercury, indeed, as long as it retains its nature, certainly will ſalivate or purge, if given imprudently, or if the patients do not take proper care of themſelves. Beſides, among a variety of patients, ſome will certainly be met with where

where this medicine proves not ſo efficacious as has been pretended. Every phyſician who has had ſome practice in venereal complaints, muſt have met with caſes where one mercurial preparation has produced little or no effect, whilſt another, tried afterwards, ſucceeded beyond expectation. Theſe caſes we are not able to account for; nor do we as yet know the nature of the human body ſufficiently to foreſee them *à priori*. Keyſer's pills are a ſaline mercurial preparation, where the mercury is firſt divided by a long continued trituration, and then diſſolved in vinegar. Hence, like all other mercurial preparations, it may ſometimes produce very good effects, and perfectly cure the diſeaſe; whilſt, in other inſtances, it may prove leſs uſeful, or even hurtful*.

The *hydrargyrum tartariſatum*, we call a combination of mercury with ſimple acid of tartar, in order to diſtinguiſh it from the *Tartarus hydrargyratus*, an invention of Dr Preſſavin at Paris, who gave it the name of *terre feuilletée mercurielle*. This latter preparation being a combination of mercury with purified tartar, or cream of tartar,

* The *hydrargyrum acetatum*, prepared by adding to a diluted ſolution of mercury in nitrous acid, a ſolution of alkali vegetabile acetatum *(ſal diureticus)*, is an ingenious preparation invented by Mr Scott at Edinburgh, and perhaps preferable to that of Keyſer. It certainly contains more mercury than his, becauſe metals can be diſſolved in acids only in proportion to the loſs of their phlogiſton; and in the latter preparation, the mercury is more reduced to a calx by its previous union with the nitrous acid. Hence it is more ſoluble in the acetous acid, as ſoon as the acid of nitre, diſengaged from the metal by the fixed vegetable alkali, leaves the former at liberty to act upon it.

which is a middle ſalt compound of vegetable alkali, ſuperſaturated with the acid of tartar. Both theſe preparations are nearly of a ſimilar nature with the former, though perhaps, in ſome reſpects, preferable to it.

The *hydrargyrum nitratum*, or mercury united with nitrous acid, has been employed in different forms and preparations internally and externally. For external uſe the ſolution diluted with water has been made uſe of as a waſh, and is a very good medicine for ſhancres, &c. The ſame ſolution made with one ounce of quickſilver to three ounces of nitrous acid, and while yet warm united with a pound of hog's-lard by a careful trituration, yields, under the name of *unguentum citrinum*, one of the moſt efficacious remedies I know of for obſtinate ſyphilitic complaints of the ſkin. The red precipitate, or *hydrargyrum nitratum rubrum*, prepared from the ſame ſolution, expoſed to fire till it acquires the colour mentioned, is of a corroſive nature, and therefore employed only in powder ſprinkled upon venereal ulcers as a cauſtic. For internal uſe the hydrargyrum nitratum has been commonly given from half a grain to a grain, in a quart of any of the decoctions.—But the *hydrargyrum nitratum cinereum*, in the new Edinburgh Pharmacopœia, called by its inventor Dr Black *pulvis mercurii cinereus*, is one of the mildeſt of the ſaline mercurial preparations, and may be given to the doſe of a grain every evening, and occaſionally alſo every morning.—The following is the method of preparing it: Quickſilver, diluted acid of nitre, of each

equal

equal quantities in weight. After the mercury is diſſolved, the ſolution is to be diluted with pure water, and as much liquid volatile alkali (*ſpiritus ſalis ammoniaci*) to be dropped into it as is ſufficient for depriving the mercury of the acid: afterwards the grey powder is to be waſhed with pure water and dried.——The ſyrup of Bellet, (commonly called *vegetable ſyrup*) a celebrated compoſition, the ingredients of which are kept ſecret, is, as I was informed by people of authority in France, mercury precipitated from its ſolution in the acid of nitre by fixed vegetable alkali, and the precipitate afterwards diſſolved in vitriolic ether mixed with ſome agreeable ſyrup.

I ſhall now take notice of a preparation of mercury, firſt recommended by the celebrated Baron Van Swieten. This preparation is the corroſive ſublimate, (*mercurius ſublimatus corroſivus*); or, as I would rather call it in the more accurate language of chemiſtry, the *hydrargyrum muriatum (fortius.)* Some years ago this medicine engaged the attention of all Europe. By ſome it was recommended as a moſt excellent and efficacious remedy againſt the moſt inveterate complaints, and worſt ſtages of the venereal diſeaſe. It was particularly recommended in eruptions on the ſkin, and in venereal affections of the bones; while others exclaimed againſt it as being frequently productive of the worſt effects without ever radically curing the diſtemper. Both parties ſeem to have gone too far in praiſing

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as well as blaming. I have ſeen caſes where this medicine has perfectly cured the moſt inveterate and obſtinate venereal complaints; while in others I have found it produce effects of the worſt kind, ſuch as loſs of appetite, griping, purging, headach, fever, anxiety, oppreſſion of the breaſt, and even ſpitting of blood, without curing, or even appearing to have the leaſt effect on the diſeaſe. But in general I have frequently obſerved that this medicine very ſoon mitigates the moſt troubleſome ſymptoms of the venereal diſeaſe, without effecting a radical cure, even after being applied for a very conſiderable time; and I am apt to think now, that its great reputation aroſe at firſt from this property of frequently alleviating ſo remarkably the ſymptoms.

Upon the whole, though it is certain that there are ſome conſtitutions which will never bear this violent medicine without danger, yet, from ſuch obſervations as I have been able to make, it ſeems probable, that the bad effects attributed to the corroſive ſublimate have ſometimes ariſen either from its improper preparation, from an immoderate doſe, or otherwiſe from a defect of practical judgment in the phyſician or ſurgeon. Therefore, although I never like to employ violent remedies where I can effect a cure with mild ones; yet it muſt be allowed, that, in practice, caſes will ſometimes occur attended with ſuch ſymptoms as require the uſe of the moſt powerful medicines, if for no other purpoſe but for a ſpeedy temporary relief.

relief. In theſe caſes it will ſometimes be highly adviſable to have recourſe to the ſublimate; tho' it is probable to me, that ſuch caſes are much leſs frequent than it is commonly thought. But at any rate, the conſtitution of the patient muſt be well conſidered before we have recourſe to this medicine. If he be of a ſtrong habit of body, and his lungs healthy, we may ſafely try the ſublimate, uſing the neceſſary precautions with regard to its doſe and manner of exhibition: but I would never recommend it where the patient is of a weak, delicate, and irritable habit of body, or if he has a ſmall cheſt, has had formerly an hæmoptyſis, or any pulmonary complaint; for theſe perſons I have always obſerved to ſuffer from the uſe of the ſublimate. Some indeed who were apparently of a ſtrong conſtitution, I have ſeen equally affected by this remedy; for which reaſon it is always neceſſary to be cautious in the uſe of it. We ought never to begin with more than a quarter or at moſt half a grain a-day, diſſolved in milk, barley-water, or a decoction of ſarſaparilla. When given in this manner, if the patient is a proper ſubject for this medicine, it will not readily produce any bad or at leaſt any dangerous conſequences; the leſs ſo when adminiſtered in a warm ſeaſon, or in a hot climate. In uſing the ſublimate, it ought beſides always to be remembered, that we can never be too careful with regard to its choice; and that with the utmoſt care and attention to the preparation of the ſublimate, it is hardly ever poſſible to obtain it of the ſame degree of ſtrength, even by follow-

ing always the very ſame proceſs. In all caſes therefore the patient ſhould be ordered to leave it off immediately on perceiving any of the above-mentioned bad ſymptoms. Sometimes it alſo occurs in the ſhops adulterated with arſenic, which may be diſcovered when mixed with lime-water, in which caſe it will produce a black colour; whereas, if genuine, it yields with the ſame an orange-coloured precipitate, to which we gave the name *lotio ſyphilitica flava*, if one drachm of ſublimate is added to one pound of lime-water. Its texture beſides, if genuine, ought to be of a radiated appearance; whereas the ſame, if adulterated, has rather a granulated one.

The *hydrargyrum muriatum mitius*, or ſtill more properly the *calx hydrargyri muriata*, commonly called *calomel*, *mercurius dulcis*, *mercurius ſublimatus dulcis*, *panacea mercurialis*, *aquila alba*, &c. is a milder preparation than corroſive ſublimate, but ſtill an acrid one, and thus very apt to produce gripings, and to run off by ſtool. Beſides, as its manner of acting depends very much on the accuracy of its preparation, and other circumſtances which we are not maſters of, its efficacy in curing the lues is not much to be depended upon. Indeed calomel is in different countries, in different ſhops in the ſame country, nay even in the ſame ſhops at different times, a very different medicine. On this account, tho' it cannot be denied that many have been cured of the venereal diſeaſe by this medicine, I never made uſe of it internally but for a mercurial purge,

purge, till of late when Mr *Scheele*, by a new method of preparing it *via humida* inſerted in the *Acta Stockholm*, has greatly removed all the objections this medicine was formerly liable to. As it will, perhaps, be agreeable to ſome of my readers to be more exactly acquainted with this latter proceſs, I ſhall inſert it here.

" Half a pound of quickſilver, and the ſame quantity of pure aquafortis, are to be put into a ſmall veſſel with a long neck, the mouth of which is to be covered with paper. The veſſel is then to be placed in a warm ſand-bath; and after a few hours, when the acid affords no ſigns of its acting any longer on the quickſilver, the fire is to be increaſed to ſuch a degree that the ſolution may nearly boil. This heat is to be continued for three or four hours, taking care to move the veſſel from time to time, and at laſt the ſolution is to be ſuffered to boil gently for about a quarter of an hour. In the mean while we are to diſſolve four ounces and a half of fine common ſalt in ſix or eight pints of water. This ſolution is to be poured boiling into a glaſs veſſel, in which the abovementioned ſolution of quickſilver is to be mixed with it, gradually, and in a boiling ſtate alſo, taking care to keep the mixture in conſtant motion. When the precipitate is ſettled, the clear liquor is to be drained from it, after which it is to be repeatedly waſhed with hot water till it ceaſes to impart any taſte to the water. The precipitate obtained by this method is to be filtered, and afterwards dried by a gentle heat.

" It might be ſuppoſed, that when the nitrous acid

acid ceaſes to effervesce with the mercury, it is ſaturated with it: but this is far from being the caſe; the acid, when the heat is increaſed, being ſtill able to diſſolve a conſiderable quantity of it; with this difference, however, that the quickſilver at the beginning of the proceſs is calcined by the acid, but afterwards is diſſolved by it in a metallic form. In proof of this we may obſerve, that not only more elaſtic vapour ariſes, but alſo that by adding either fixed or volatile cauſtic alkali we obtain a black precipitate; whereas, when the ſolution contains only calcined quickſilver, the precipitate becomes yellow by ſuch an addition. If this black precipitate is gently diſtilled, it riſes in the form of quickſilver, leaving a yellow powder, which is in fact that part of the mercury that in the beginning of the operation was calcined by the nitrous acid.

"The boiling of the ſolution for about a quarter of an hour is neceſſary, in order to keep the *hydrargyrum nitratum* in a diſſolved ſtate, it being much diſpoſed to chryſtallize, in general, ſome of the mercury remains undiſſolved; but it is always better to take too much than too little of it, becauſe the more metallic ſubſtance the ſolution contains, the more mercurius dulcis will be obtained.

"It is neceſſary to pour the mercurial ſolution into the ſolution of ſalt by a little at a time, and cautiouſly, ſo that no part of the undiſſolved quickſilver may paſs along with it. Two ounces of common ſalt are ſufficient to precipitate all the mercury; but then it may eaſily happen that ſome

ſuperfluous

ſuperfluous mercurius corroſivus attaches itſelf to this precipitate, which the water alone is incapable of ſeparating completely. This is undoubtedly the reaſon why mercurius præcipitatus albus is always corroſive. I have found that common ſalt poſſeſſes the ſame quality as ſal ammoniac, viz. that of diſſolving a great quantity of mercurius corroſivus. I therefore employ four ounces and a half of common ſalt in order to get the mercurius corroſivus entirely ſeparated.

" If we conſider the manner in which mercurius dulcis is obtained in the dry way, by ſublimation, we ſhall not find it difficult to give the rationale of this new proceſs.

" Mercurius corroſivus albus is a middle ſalt, conſiſting, as is well known, of marine acid combined with calx of mercury. This ſalt is capable of diſſolving a good deal of quickſilver in a metallic form; but for this purpoſe the moſt minute particles of each muſt be reciprocally mixed. This happens, when by means of heat they are both converted into vapour. The ſame thing occurs in the abovementioned proceſs. The ſolution firſt ſpoken of contains the calx mercurii and quickſilver divided into the moſt minute particles. If to this ſolution we add marine acid, or (to ſave expence) common ſalt, the marine acid will unite with the calx of mercury, and the reſult of this union will be a true mercurius corroſivus albus; and as the ſolution contains quickſilver in its metallic ſtate, this will immediately attract as much of the mercurius corroſivus as is neceſſary to ſaturate it, and by this means a real

mercurius

mercurius dulcis will be produced, which, from its being inſoluble, will be immediately precipitated.

" The following facts are proofs that this precipitate is a good mercurius dulcis. 1ſt, It is entirely taſteleſs. 2dly, I have ſublimed it, and examined what aſcended in the beginning, and which ought to have been corroſive, if the precipitate had contained any thing of that nature, it being well known that mercurius corroſivus aſcends ſooner than mercurius dulcis; whereas, through the whole of the ſublimation, what aroſe was a pure mercurius dulcis, exactly like that which is obtained in the common manner. 3dly, I have mixed this precipitate with one fourth part of quickſilver and ſublimed it, upon a ſuppoſition that if it contained too much mercurius corroſivus it would be able to unite with more quickſilver; but ſo far was this from being the caſe, that the quickſilver was not diminiſhed in weight by the experiment. 4thly, It is known that cauſtic alkalis and lime-water give mercurius dulcis a black colour. The ſame thing happened with mine. The black colour is no other than quickſilver divided into very fine particles.

" That the proceſs I have been deſcribing is more advantageous than that which is uſually adopted, I cannot doubt; becauſe, in the firſt place, this mercurius dulcis can be prepared with leſs difficulty, with leſs expence, and without employing corroſive ſublimate. 2dly, As there can be no danger of its being in any degree corroſive, provided it be ſufficiently edulcorated, it may always

ways be given with ſafety. 3dly, The operator is not expoſed to that noxious duſt which in the old method ariſes during the trituration of the corroſive ſublimate and quickſilver. 4thly, This is much finer than the common mercurius dulcis, it being impoſſible to make the latter equal to it in this reſpect, however long it may be triturated."

Calomel thus prepared will prove excellent, not only for internal, but eſpecially for external uſe, either in powder, or ſuſpended in ſimple water or ſome mucilaginous ſolution; occaſionally alſo a drachm of it may be mixed with four ounces of lime-water, under the name of *lotio ſyphilitica nigra*, to diſtinguiſh it from the *lotio ſyphilitica flava* made with corroſive ſublimate and lime-water. Calomel, when well prepared, muſt give the lime-water a black colour, as corroſive ſublimate does a yellow. Dr *Ward's white drop* proves, in ſome caſes, a valuable medicine.

The *calx hydrargyri vitriolata*, commonly called *turpeth mineral*, or *mercurius emeticus flavus*, is a medicine now very little uſed, except by thoſe who think a mercurial vomit preferable to one of tartar emetic or ipecacuanha, for curing a ſwelled teſticle ariſing from a venereal cauſe. Some inſtances however I have ſeen, where this medicine, given daily in very ſmall doſes, effectually removed moſt obſtinate venereal complaints of the ſkin.

I come laſtly to ſpeak of a medicine, which, ſome time ago, and even yet, is made uſe of by many for the cure of the lues; I mean *Plummer's powder or pills;* which, properly ſpeaking, are not a mercurial preparation, but a mechanical mixture

ture of mercurius dulcis, and ſulphur of antimony. I have already obſerved, that mercurius dulcis, when prepared by ſublimation, is a very different medicine in different countries and places; that it is therefore a medicine not to be depended upon: for this reaſon, I never would adviſe any perſon, as well for his own ſatisfaction as that of his patient, to truſt to Plummer's pills for curing the venereal diſeaſe. Plummer has compounded the calomel with ſulphur of antimony, probably for the purpoſe which ſtill ſeems to be expected by thoſe who make uſe of this compoſition, viz. by means of the ſulphur to prevent ſalivation, and to direct the mercury to the ſkin. This ſeems eſpecially to be the deſign in cutaneous eruptions of the venereal kind. But though this medicine may ſometimes be effectual in removing cutaneous diſorders, I muſt, from my own experience, as well as from that of ſeveral other unprejudiced practitioners, pronounce it a very improper one for curing a confirmed lues. Repeated inſtances indeed have come under my obſervation, where theſe pills having been taken for a conſiderable time, have removed the ſymptoms for a time, without effecting a radical cure; which are to me ſufficient reaſons for thinking it an unſafe medicine, and conſequently that no practitioner ought to put confidence in it for the cure of the lues, when he has a ſafer one in his hands.

Whether crude mercury boiled with ſimple water communicates to it ſomething of its qualities, and with what ſucceſs ſuch a decoction might be

be adminiſtered for curing venereal complaints, I am not able to ſay. I have ſeen this decoction given to children affected with worms, in different parts of the continent; with what effect, I had no opportunity to aſcertain: but I know of a dog in London who was radically cured of a moſt obſtinate mange, for which a variety of medicines had been tried in vain, from the uſe of this decoction for his common drink.

IV. *On* Ptyalism *or* Salivation.

It has been a matter of controverſy, whether a confirmed lues may be radically cured without ſalivation; and though there is now hardly any medical man who doubts of the poſſibility of a perfect cure without it, there are ſtill many who employ ſalivation, not only for the cure of the lues, but, in ſome countries, for that of the Gonorrhœa alſo. This mode of treatment, in the former caſe, is ſtill very much in vogue, in private practice as well as in hoſpitals, eſpecially in France: in other countries, it is almoſt entirely confined to hoſpitals.

How far this practice of ſalivating ſuch patients is juſtifiable, in the former as well as in the latter caſe, ſhall be the ſubject of my preſent inquiry.

It has been the opinion of many, and publicly aſſerted by Dr Friend, and even by ſeveral late writers, that a ſalivation is not only neceſſary to effect a radical cure, but alſo that the greater the ſalivation,

ſalivation, the more certain and effectual will be the cure of the lues, eſpecially when the bones are affected.

I muſt confeſs, I have always experienced the direct contrary. Amongſt a great many patients of different ages, conſtitutions, and climates, who have been under my care, I have not only not found one who required ſalivation, but I have, on the contrary, conſtantly obſerved, that the greater the ſalivation, the leſs certain and effectual was the cure of the lues. This is ſo true, that even the modern advocates for ſalivation unanimouſly confeſs, that a ſtrong ſalivation is hurtful, and that only a gentle one ſhould be raiſed. Could I allow this to be right, I would obſerve, that to ſtop, or even moderate, a ſalivation once begun, is in many caſes more eaſily ſaid than accompliſhed. This is often entirely out of our power; and it is yet one of the great deſiderata in medicine, to know a ſpecific remedy that will produce ſuch an effect. This is ſo little in our power, that I have ſeen more than once patients carried off by ſalivation, (their ſtrength being totally exhauſted) before it could be leſſened or ſtopt by any remedy whatſoever. Others who did not ſink entirely under it, remained languid from the evacuation, for months and even years, and ſeveral I have ſeen die in a conſumption brought on by ſuch a courſe. Beſides, a ſalivation is not only very troubleſome to the patient, by ſpitting day and night, and by filling the room with a very diſagreeable ſmell; but frequently alſo produces painful ulcers in the mouth, fauces, &c. which,

which, if not taken care of in time, or being miſtaken for venereal ones, by continuing the uſe of mercury, become more dangerous than the venereal diſeaſe itſelf.

It may ſeem ſurpriſing, therefore, how ſuch a dangerous method of attempting the cure of the venereal diſeaſe as that by ſalivation ſhould ſtill be retained and practiſed in ſome hoſpitals. The three following reaſons, indeed, I have heard alleged. 1. To confine the patients with the gonorrhœa or lues to the room, and to prevent them from getting a freſh infection before they are cured of the firſt. 2. To get rid of ſuch poor patients in a month or five weeks, in order to take others in their place into the hoſpital, who are treated and ſent away in the ſame manner. 3. Becauſe many of the lower claſs of people have an unhappy prejudice in favour of this method, and imagine they cannot be radically cured without what they call a good and continued ſalivation. To me, however, theſe reaſons appear wholly inſufficient. To prevent the patients from getting a freſh infection, better means might be eaſily found out. With regard to the ſecond point, I think it more reaſonable and more humane to cure a ſmaller number of patients radically without ſalivation, even though a longer time ſhould be taken up in the cure, than to relieve the complaints of a great number in a ſhorter time by ſuch an uncertain, troubleſome, and ſometimes dangerous method. We may add to this, that experience daily ſhows, that a number of thoſe patients who ſeem to be cured by the ceſ-

ſation of the ſymptoms during ſalivation, very frequently return in a ſhort time to the hoſpital with the ſame ſymptoms they were affected with before, or find themſelves obliged to ſeek aſſiſtance ſomewhere elſe, at the ſame time that they ſolemnly proteſt againſt their having received a new infection. The third reaſon alleged in favour of ſalivation is the worſt of all. I am of opinion, that no perſon of integrity, who practiſes medicine, ſhould ever comply with the prejudices of his patients when they may be hurtful to them, or when he knows that by a contrary method he is able to cure them with greater certainty and ſafety. Beſides, it will be an eaſy matter for a phyſician or ſurgeon, who knows how to gain the confidence of his patient, to convince him of the folly of ſuch prejudices. Salivation, therefore, being, in my opinion, an exceptionable method of cure in any circumſtances whatever, I think it, in all caſes, moſt prudent to avoid it, or, if preſent, to moderate and remove it as quickly and ſpeedily as poſſible.

The method of preventing a ſalivation I have laid down above, when ſpeaking on mercurial frictions. The means to be uſed for this purpoſe are ſhortly the following. 1. A careful adminiſtration of mercury both as to its preparation and doſe. 2. The avoiding cold or damp air, eſpecially at night. 3. The uſe of warm cloaths; or, in a cold damp ſeaſon or climate, the conſtant wearing of flannel next the ſkin. 4. The repeated uſe of warm baths, and the internal uſe of diaphoretic or diuretic decoctions along with the

the mercury. 5. The avoiding too hot rooms and confined air. 6. Covering the neck and head but very ſlightly day or night. 7. Taking a doſe of gentle cooling phyſic, and intermitting the uſe of the mercury as ſoon as the breath and teeth begin to be affected. 8. If the patient is not of a phlogiſtic habit of body, a free diet, with the moderate uſe of wine, is to be ordered, rather than a low one. Smoaking tobacco ſhould alſo be avoided, during a courſe of mercurials, by thoſe who are accuſtomed to it.

It is alſo to be obſerved, that, in general, a ſalivation will take place more readily under the uſe of acrid mercurial preparations, and in a cold and damp ſeaſon or climate; that ſome conſtitutions are more diſpoſed to it than others; and that particularly thoſe who have previouſly taken mercury are often ready to fall into a ſalivation by uſing the ſmalleſt doſe, though perhaps in the former diſeaſe they felt no ſuch effect from the uſe of it.

A variety of medicines given ſeparately, or combined with the mercury, have been likewiſe recommended for preventing it from affecting the mouth, as well as for checking a ſalivation after it has taken place. The principal of theſe are ſulphur, ſulphur of antimony, camphire, the Peruvian bark, and iron. By a careful attention, however, to the foregoing rules, I think it is in general not very difficult to avoid a ſalivation, without having recourſe to any of theſe remedies; eſpecially as I have ſeen ſome of them repeatedly applied by others without ſucceſs. With regard to the latter point, viz. the abating and removing

a ſalivation when once begun, it is ſometimes a very difficult matter: the following method, however, with an exact obſervance of the rules above mentioned, will frequently be attended with ſucceſs.

As ſoon as the patient feels his mouth affected, he ought to leave off the uſe of mercury, and keep within doors, in a moderately warm room, if the ſeaſon be cold. If his ſtrength and conſtitution will allow, we may adminiſter him a gentle laxative; but ſhould be careful about preſcribing purgatives, becauſe they often will bring on a diarrhœa, which we ſhall find ſometimes great difficulty to ſtop, and which may prove dangerous in its conſequences. If he can bear it, he ſhould alſo, for four or five days, be placed every evening in a warm bath, rubbing his body in the mean time with a fleſh-bruſh or piece of flannel; and when he comes out of the bath, he muſt again dreſs himſelf immediately in flannel cloaths. If phlogiſtic ſymptoms occur, he ſhould be confined to a low diet, and drink barley-water or any other mucilaginous decoction; but if his ſtrength is very much reduced, a good nouriſhing diet, together with the uſe of wine, an infuſion of Peruvian bark, or guaſſia wood, in wine or cinnamon-water, and the free country air, are certainly more proper. If the air is dry, he ſhould not confine himſelf to his room, but go abroad a little, unleſs it be very cold. When the ſalivary ducts are very much relaxed, and the ſpitting continues undiminiſhed, an aſtringent gargle may, with proper precautions, be preſcribed.

ſcribed. It may be made of the decoction of Peruvian bark, or of the *cortex ſalicis albæ*, in red wine or in water; to which, according to circumſtances, may be added ſome tincture of gum-lac or of myrrh. Common ſulphur may alſo be given occaſionally, either alone or joined with ſome cooling purgatives. The ſulphur of antimony has been recommended in ſuch caſes as a diaphoretic. An eminent phyſician has recommended for this purpoſe the *aurum fulminans*, given every day from three to five grains, as a very efficacious medicine; but as I have never had occaſion to try this remedy myſelf, I am unable to ſay whether this advice is founded on experience, or only on a theory derived from the chemical affinity or attraction between mercury and gold. In an obſtinate ptyaliſm, a bliſter, ſeton, or iſſue, in the neck, or the volatile liniment applied to the throat, ſometimes prove ſerviceable; and in deſparate caſes we might alſo try the effect of repeatedly pouring cold water over the head and face, letting the patient ſit in the mean time with the reſt of the body immerſed in a warm bath.

CHAP. XIV.

Of the Reaſons why certain VENEREAL COMPLAINTS *do not yield to* MERCURY.

THE reaſons practical obſervations have ſuggeſted to me why mercury ſometimes fails in curing venereal complaints, depend on the following cauſes; viz. 1. On mercury and its preparations. 2. On the method of exhibiting them, internally as well as externally. 3. On the greater or leſs irritability or conſtitutional ſtrength of the patient, or ſome faults committed by the ſame. 4. On the nature of the diſeaſe itſelf.——I ſhall treat of them in order.

Since the uſe of mercurial ointment in frictions, the firſt and only method made uſe of in the ſixteenth century, ſeveral other preparations, both for internal and external uſe, have been diſcovered and tried, with a view to cure venereal complaints which would not yield to frictions, or to remove the diſeaſe more ſpeedily or in a more convenient manner. I ſhall avoid making here any reflections on the preference either of thoſe methods claim over the reſt; and ſhall confine myſelf entirely to the reaſons why mercurial frictions, as well as other preparations of mercury, ſometimes prove ineffectual for removing

ſome

ſome venereal complaints, having offered ſome obſervations on theſe preparations before.

I have ſeen a variety of perſons affected with gleets, ſhancres, pains and caries of the bones, cutaneous eruptions, herpes, ulcerations of the noſe, throat, &c. condylomatous or verrucous excreſcences in different parts of the body, but eſpecially about the anus and pudenda, which ſeemed obſtinately to reſiſt the effects of mercury; and which, ſo far from being removed after a copious and diſagreeable ſalivation, were rather increaſed by it, and, when removed, often returned again ſhortly afterwards.

After a careful inquiry, I found that the cauſes of this difficulty were very often to be ſought for in the medicine itſelf; being owing, either, 1. To its being badly prepared, or ill fitted for curing the diſeaſe. 2. To its not being given in ſufficient quantity, or continued for a ſufficient length of time. 3. To its being adminiſtered in too great a quantity, and by that means exciting a ſalivation, ſweats, and purging, without deſtroying the venereal virus in the body; or, laſtly, To its being mixed with other ſubſtances, ſo as to render it inefficacious.

The great point in curing the venereal diſeaſe by mercury, being to introduce ſuch a quantity of it into the habit as ſhall be ſufficient totally to eradicate the venereal poiſon, it is evident that medicines unſkilfully or negligently prepared, may have the worſt effects. Thus, for example, if ſublimate is mixed with arſenic in order to

render it whiter, and give it the better appearance, or if mercury is combined with ſubſtances incapable of holding it ſuſpended, or if, when made into pills, it is not ſufficiently triturated ſo as to be equally divided, its effects cannot but be precarious. In the latter caſe one pill may contain three or more grains of mercury; and another only one grain, or perhaps none at all; and when this is the caſe, the latter will have no effect, while from the former the patient may experience a violent griping and purging.

Here we may obſerve, that a mercurial preparation is always ill fitted for the purpoſe, whenever it is incapable of entering into the habit, or if, when it has entered the circulation, it excites a ſalivation before it has deſtroyed the virus; for it is erroneous to believe that by ſalivation all the poiſon is carried off, and the diſeaſe by that means radically cured, juſt the contrary to this being the caſe. It is true, that if a ſalivation is brought on, the patient will often find all his ſymptoms diſappear, and of courſe be induced to think himſelf cured; but ſome months, and ſometimes only a few weeks afterwards, the complaints will, in many caſes, return again with increaſed violence. I do not deny, however, but that the diſeaſe, eſpecially if ſlight, may by this means be radically cured: but I maintain, from repeated obſervations in private as well as hoſpital practice, that the practitioner can never be certain of the real cure; and of courſe that the cures effected by ſalivation are not only doubtful, but oftentimes altogether ineffectual.

But

But upon this ſubject I had occaſion to treat more fully in the foregoing chapter *Of mercurial preparations in particular*, and under the head of *Salivation*.

The principal remark to be made here is, that to cure our patients well and radically, no practitioner who has their welfare at heart, and who does not adminiſter his medicines at random, will ever make uſe of any mercurial preparation or compoſition which he has not prepared himſelf, or at leaſt taken care to ſee prepared by ſome one on whoſe integrity and care he can rely. The repeated diſappointments I have experienced myſelf, and which I have ſeen happen to others, have rendered me ſcrupulouſly exact on this head.

We ſhould likewiſe be careful not to make uſe of mercurials combined with other medicines, becauſe they not only diſappoint us, but often render the cure more tedious and precarious. I have ſeen repeated inſtances of this with Plummer's pills; and have heard the ſame remark made by others who were attentive and eminent practitioners.

We ought never to give acrid preparations of mercury, when we can effect a cure with mild ones. The dreadful effects I have repeatedly been an eye-witneſs to from remedies of this ſort, eſpecially from the corroſive ſublimate, oblige me to inculcate this caution with the greater warmth. The conſtant effects of ſuch acrid compoſitions, eſpecially in delicate habits, are pains in the ſtomach and bowels, loſs of appetite, violent gripings,

pings, diarrhœas, and ſometimes dangerous colics; or, if they enter into the circulation, they will excite ſpitting of blood, convulſions, nervous fevers, and other complaints, more baneful even than that they were intended to eradicate; or elſe they will perhaps excite a ſalivation, and of courſe prevent them from being continued to complete the cure. If we ſometimes adminiſter them, as may now and then be requiſite in cutaneous or deep-ſeated venereal complaints, we ſhould carefully conſider the habit of the patient; and if that will admit of them, ſhould begin with very ſmall doſes, in order to avoid the abovementioned ſymptoms, particularly the diarrhœa; for when that takes place, the mercury, inſtead of entering into the maſs, will be carried off by ſtool, and of courſe occaſion trouble and pain to the patient, without affording him any relief. In general, therefore, we ſhould be careful in the choice and adminiſtration of mercurial preparations: we ſhould find out, in every caſe, that preparation which ſeems beſt to agree with the conſtitution, and never inſiſt obſtinately on the uſe of a preparation or doſe which excites bad ſymptoms in the body: we ſhould not imitate the example of thoſe quacks whoſe knowledge conſiſts entirely in a noſtrum, which they give indiſcriminately to all their patients, for every kind of venereal complaint, and pronounce their patients cured as ſoon as the ſymptoms of the diſorder have diſappeared; to which aſſertion, credit is the more readily given, as moſt young men diſlike to be conſtrained or confined to a courſe of

medicines

medicines for a length of time. Thus they will now and then cure a patient; but in the mean time, ruin the conſtitution of many, and commonly render the diſeaſe more obſtinate and inveterate for the future. The poiſon indeed remains latent for weeks, months, or ſometimes even for years; but then it breaks out with redoubled rage and violence, and not unfrequently produces ſymptoms and diſeaſes, the nature of which, eſpecially in women, we muſt only gueſs at, and which, in that ſtate, ſometimes baffle the ſkill of the moſt able phyſician; for venereal complaints, the older they are, the more obſtinate they prove againſt the power of mercury.

I come now to the third point, why mercury fails ſometimes in curing the lues, viz. on account of the conſtitution of the patient. We ſometimes meet with patients, eſpecially among the female ſex, or ſuch as have taken mercury for former venereal complaints, whoſe conſtitution is now ſo irritable, that, after the adminiſtration of a few grains or frictions, they are either affected with a nervous fever, ſpaſms, headach, or they very readily fall into a ſalivation, on the ſecond or third day. In theſe conſtitutions we ought to be peculiarly careful to find out the preparation and doſe beſt adapted to them. The Peruvian bark, or ſome other vegetable tonic, is here ſometimes adminiſtered with mercury to great advantage. If we neglect theſe precautions, indeed, many patients of this kind will be ſufferers for life, without ever being cured radically. There is one remark to be made here,

to

to which in general little attention has been hitherto paid. Moſt writers and practitioners confine their venereal patients under a mercurial courſe, without any diſtinction, to a low diet, as well with regard to eating as drinking. This rule is however a very improper one, when generally applied. Such a diet will be very proper for ſtrong, vigorous conſtitutions; but, for weak, delicate, or irritable ones, it will ſometimes be extremely improper. A full diet, with the moderate uſe of wine, ought to be allowed them; otherwiſe mercury will produce no effects upon the poiſon, though very diſagreeable ones upon the conſtitution. The warm bath will ſometimes much aſſiſt in theſe caſes. Nature readily cooperates with mercury in ſome conſtitutions; whereas in others it does but little, or acts ſlowly, and with difficulty. But beſides this peculiarity in the conſtitution, we often obſerve, that patients render their complaints complicated and obſtinate, by attempting to cure themſelves, or by applying to quacks or unſkilful perſons in the art of healing. They frequently alſo hurt themſelves by neglect of diet, or by not making uſe of the medicines in the manner preſcribed, or by not continuing the ſame long enough, but leaving off as ſoon as the ſymptoms diſappear, by expoſing themſelves imprudently to the damp and cold atmoſphere, eſpecially at night, or by becoming impatient and growing inconſtant, going from one phyſician to another, making uſe for ſome days or weeks, of one medicine, and then of another. By all theſe different circumſtances,

ſtances, venereal complaints are ſometimes rendered extremely obſtinate.

On account of the diſorder itſelf, mercury ſometimes fails, when the patient, by a previous large or imprudent uſe of mercury, can hardly bear a few grains or a few frictions without ſalivation: in this caſe, if we leave off the uſe of mercury, our patient will not get rid of his diſorder; and if we continue it, we are ſure to bring on a troubleſome ptyaliſm, which will laſt ſometimes for weeks or months, expoſing the patient to dangerous conſequences, and often leaving the principal diſorder uncured. What may be done in theſe circumſtances, I have hinted in ſeveral places of the foregoing chapters. But we are by far more frequently diſappointed in our expectations from mercury, by miſtaking the nature of the diſorder; by judging thoſe complaints venereal, which often are owing either to the effects of mercury, or to a ſtate of the diſorder, which, though originally ariſing from the venereal virus, has degenerated either by time or other cauſes into a diſeaſe of a quite different nature, for which mercury is not only no antidote, but a real poiſon. Of theſe complaints we have ſpoken already, and ſhall ſpeak further hereafter.

CHAP.

CHAP. XV.

On other REMEDIES *recommended for curing the* LUES.

BESIDES the mercurial frictions, the fumigations, and the internal uſe of the different mercurial preparations, a variety of other medicines has been recommended, either to cure the different venereal complaints without mercury, or to aſſiſt mercury in its operation; and as there are many inſtances of the mercury failing, or expoſing the patients to diſagreeable conſequences, a remedy has been ſought for, which, without having any of the noxious qualities of mercury, might have all its powerful and good ones. Moſt of the quack medicines, ſold and praiſed as preparations from the vegetable kingdom for this purpoſe, I have been at pains to analyſe, and have found them to be nothing but one or other mercurial preparation diſguiſed. Several other remedies have been recommended as ſuccedaneums for mercury, for the cure of the venereal diſeaſe, which, we are told, have been made uſe of for this purpoſe with ſucceſs, before mercury was employed; and are, we are credibly informed, made uſe of even at this time, without any mercurial, with the beſt effect, in South as well as in North

North America, for curing the venereal diſeaſe, radically. Such of them as I have ſeen made uſe of for the ſame purpoſe in Europe, have, in every inſtance at leaſt that came under my inſpection, never been attended with the deſired effect; and I have never ſeen one inſtance of a confirmed pox cured by them. Some of them, however, are worthy our attention, and certainly deſerve a fairer trial than has hitherto been made to aſcertain their power, eſpecially ſuch as are recommended by men of knowledge and obſervation. The root of the *Lobelia ſyphilitica*, with which, as we are inſtructed by Dr Kalm, and afterwards more exactly by Mr Bartram*, the inhabitants of North America cure the venereal diſeaſe as effectually and radically as we do with mercury. They take a handful of the freſh, or (which he ſays is better) dried plant; they waſh it, and boil it in a gallon and a half of water; of which decoction the patient drinks every day, if his conſtitution will ſuffer it, a quart in the beginning, gradually augmenting the doſe, till he can no longer bear the purging excited by it; then he leaves it off for a day

or

* The latter author adviſes the patient to take two gills of this decoction three times a-day, on an empty ſtomach, and augment the doſe according to the ſtrength of the patient, making uſe of warm baths, and a proper diet at the ſame time. Care ſhould be taken not to make uſe of the lobelia longiflora, inſtead of the lobelia ſyphilitica, the former being of a much more acrid nature than the latter.—In ſome parts of Italy it is even now a law of government, not to make uſe of mercury in hoſpitals for curing the venereal diſeaſe.

or two, and, if neceſſary, continue it again till he finds himſelf perfectly well, which is for the moſt part in a fortnight. If there are any external diſorders, they waſh the affected parts with the ſame decoction.—If the diſeaſe is very obſtinate, they mix with the lobelia, the root of the *Ranunculus abortivus*, but in a ſmall quantity on account of its acrimony. In order to heal up the venereal ulcers, they dry the root of *Geum nivale*, and ſprinkle its powder upon them. They alſo cure deep and putrid ulcers, by inſperſion of the interior bark of the *Ceanothus Americanus*. A decoction of the ſtipites of the *Solanum dulcamara*, and likewiſe the root of the *Daphne mezereum* and ſarſaparilla, have been of late much recommended in obſtinate venereal complaints either in ſubſtance or in a decoction; but how far their operation ſucceeds without the previous uſe of mercury, is not yet aſcertained.

In South America, and in the Weſt Indies, a decoction of the woods of guaiac, ſaſſafras, &c. is praiſed as a remedy, with which alone the moſt confirmed lues may be eaſily cured. It may be that they remove venereal complaints between the tropics, and in the warmer climates of our globe; but in Europe I have ſeen them ſometimes prove hurtful, producing profuſe ſweats, hæmoptyſis, conſumptions, &c. in delicate and thin habits, and I never ſaw any one caſe where they effected a radical cure.—The following complicated preſcription, we have been told, is made uſe of with great ſucceſs in Brazil and Portugal, and in other countries, under the name

name of the *Decoctum Lusitanicum*, or Lisbon diet-drink. R. *Rad Sarsaparillæ, Santali albi et rubri*, of each three ounces; *Glycirrhizæ, Mezerei*, of each half an ounce; *ligni Rhodii, Guajaci, Sassafras*, of each one ounce; *Crude Antimony* five ounces: ten pounds of boiling water is to be poured upon these, and remain for twenty-four hours, then to be boiled to five pounds. Of this, strained off, the patient ought to take from three pints to two quarts a-day. But how far all these medicines, as I have said before, act without mercury, is yet very uncertain. The disease is certainly easier cured in warm climates, when well treated, than in cold ones. As to the remedies which we every day see recommended by quacks, and pretenders to secrets, as not consisting of mercury, and curing the venereal disease radically, they are, for the most part, as I have mentioned before, some mercurial preparation disguised; and I think it fortunate enough for the patients if they prove only useless to them.

CHAP. XVI.

On particular VENEREAL COMPLAINTS, *which require a peculiar Method of Cure.*

I. On the VENEREAL OPTHALMIA.

THERE are two diſtinct ſpecies of venereal ophthalmia. The one ſeems to be rather of a chronic kind, comes on gradually, and ariſes from a tainted maſs. The other is the moſt acute, violent, and dangerous of any ophthalmia I know of: it comes on ſuddenly, and owes its origin, as far as I have been able to obſerve, to a ſudden repulſion of a recent venereal gonorrhœa: ſee *Venereal Gonorrhœa.*

I have ſeen three inſtances of this dreadful diſorder, of which every one proved fatal to the ſight of the ſufferer. In two caſes, both eyes were affected with blindneſs; in the third, one was affected immediately, but ſeveral years afterwards the ſight of the other was alſo loſt, and as it ſeemed without any apparent cauſe. All old practitioners with whom I have converſed about this dreadful complaint, and who have obſerved it ſeveral times in their practice, were of opinion that it originated from a repelled recent gonorrhœa, by way of metaſtaſis. In theſe three caſes which I juſt mentioned, the diſeaſe was certainly accompanied with

with a ſuppreſſion of the clap: but whether that ſuppreſſion was the cauſe of the ophthalmy, I was not able to determine with certainty; and am much leſs capable to account for ſuch a metaſtaſis, tho' we know that a very great connection ſubſiſts between the eyes and the parts of generation.

But whatever may be the cauſe of theſe ophthalmies, the fact is this: In the three inſtances which came under my obſervation, the diſeaſe aroſe in a cold climate in winter, after the patients affected with a recent clap, were expoſed to violent cold in the open air. None of them had ever had any complaint in the eyes before. The diſcharge from the urethra was evidently diminiſhed or aboliſhed. In the mean while, a diſcharge of a puriform matter of a yellowiſh green colour, reſembling that of a clap, took place from the eyes, with the moſt excruciating pains, which were rendered unſupportable on the leaſt application of light. The ſame matter which ran out of the eyes, ſeemed, as far as it was poſſible to ſee by forcing up the eyelid, to be extravaſated in the whole anterior chamber of the eye, and, as it were, infiltrated between the lamellas of the cornea tranſparens. All remedies which were applied proved ineffectual, and perpetual blindneſs was the conſequence.

As caſes of this kind may be inſtructive, I ſhall tranſcribe one of them from my Medical Journal. The patient, a young man of a ſtrong dark complexion, of twenty-nine years of age, a captain in the army, was ordered on guard in the month of January, whilſt he was afflicted with a violent gonorrhœa. Unfortunately the day was exceſſively

cold, and he was by duty much expoſed to the open air all day and the evening: in the night he found himſelf at once afflicted in both eyes with the moſt excruciating pain, and intolerance of the ſmalleſt degree of light; which were accompanied next day with a diſcharge of puriform matter from both eyes. Upon inſpection, the albuginea was inflamed, and very much ſwelled. The phyſician who was called, applied, beſides the common remedies, ſuch as bleedings, purgatives, &c. a fomentation of hemlock. On the third day, upon a cloſer examination, the cornea was found entirely opaque, and an hypopyon formed; no ulceration appeared. The uſe of hemlock was ordered to be continued. Some days after, the inflammation and running abated; but the cornea remained opaque, ſeemed to be very much thickened, and the patient remained perfectly blind. In this patient, I clearly ſaw the arteries of the cornea tranſparens, coming from the albuginea, inflamed, and ſo filled with red blood, as if injected like an anatomical preparation, even ſo far back as in the fifth week of the diſorder.

In none of theſe three caſes were remedies applied by the practitioners to reſtore the running of the clap, nor was there an inciſion made into the cornea to diſcharge the extravaſated matter: The only two remedies from which I would expect any efficacious relief in ſuch an ophthalmy, beſides the general and topical evacuations by purgatives, leeches, bliſters, &c. with the internal and external uſe of mercury.

I was once inclined to believe, that this kind

of

of ophthalmia does perhaps arise from uncleanliness, when the patient affected with a clap, or shancres in the genitals, touches those parts, and afterwards, without washing the hands immediately, touches his eyes. I have certainly seen ophthalmies, and venereal ulcers of the eye-lids, nostrils, lips, more than once arising from such careleſsness: but in these cases I have never observed an inflammation but in one eye, and it never was so violent as the kind just mentioned; but rather, like the ophthalmies arising from a tainted mass, gave way to the topical application of the blue ointment, which, together with the internal use of mercury, is indeed the sovereign remedy in some ophthalmies.

The chronic venereal ophthalmies arising from a tainted mass, prove in many cases extremely obstinate for weeks and months. They require a regular mercurial course, especially with sublimate if the patient can bear it; repeated purgings; and in some cases, especially if the eye-lid be the affected part, the external use of the mercurial ointment, or what is, according to the observations of Dr Cullen, more preferable, the citrine ointment rubbed down with double the quantity of hog's lard, in order to render it less acrid. Laudanum dropped into the affected eye gives sometimes the most evident relief. Bathing the eye with a weak solution of sublimate four or six times a-day is likewise serviceable.

II. On Venereal Deafness.

I have seen several instances where deafness

and violent pain of the ear were brought on by venereal ulcers affecting the orifice of the Euſtachian tube in the fauces. But I have met with one inſtance, were a perfect deafneſs was the conſequence of a violent gonorrhœa being ſtopped by the internal uſe of turpentine. The patient ſaid he had had no ſhancres, nor ever any other venereal complaint before.

III. On Venereal Sore Throat.

Venereal ſore throats, as well as venereal ulcers of the mouth and fauces, ſhould, as I mentioned above, be carefully diſtinguiſhed from ſcorbutic ones, or from thoſe originating from ſaliva rendered acrid by mercury; and more eſpecially from thoſe which, though really venereal in their origin, have now changed their nature, and acquired quite a different character; as we, by continuing the uſe of mercury, may materially, and perhaps irrecoverably, hurt the patient. Judgment, derived from practice, will be the only ſure guide in that caſe. Deep ulcers covered with a white lardaceous cruſt, and confined by a hard elevated border, with a ſtrong redneſs round about them, will, I think, ſeldom miſlead if they are treated as venereal. Venereal ulcers in the throat are ſometimes ſeated ſo low down, and ſidewards, that we do not eaſily diſcover them at firſt ſight, and thence we may ſometimes be led to miſtake the nature of the diſorder. An account of the following caſes may perhaps be uſeful to ſome young practitioners.

A gentleman of a ſtrong, plethoric conſtitution, fifty-five years of age, was affected with a ſore throat and fever. The phyſician, after examining his throat and pulſe, ordered bleeding, with an antiphlogiſtic gargle and purge; when the diſeaſe not abating, eight days after, another practitioner was called, who repeated bleeding, purging, and ordered a different gargle, from the uſe of which the patient found himſelf better. At the expiration of ſeven weeks, when he felt, as he expreſſed himſelf, the diſeaſe was not quite gone, I was conſulted. After the former preſcriptions were ſhown to me, I examined his throat; and though I could not diſcover any ulcer, told him I ſuſpected a venereal cauſe; which he hardly would agree to, relating to me that he had no venereal complaint theſe many years paſt, and that ſince that time he had enjoyed the moſt perfect ſtate of health. I deſired to examine his throat once more; which he readily complied with, though he was one of thoſe perſons who with the greateſt difficulty can let their throat be examined: with a wax candle in one hand, and depreſſing the root of the tongue by means of a large ſpatula as much as poſſible with the other, I diſcovered very low down on the right ſide, a deep but ſmall venereal ulcer, which had eſcaped my ſight at firſt, and would now have done ſo if I had not examined the throat with ſuch peculiar care. Upon my telling him the evident cauſe of his diſorder, my advice was complied with; and after the internal uſe of mercury for eight days, his ſore throat was perfectly gone, and by continuing it a month longer a radical cure obtained.

The other patient was a lady of rank. She had

firſt felt a ſlight difficulty in ſwallowing within a few days, which being froſty ſhe aſcribed it to a cold. I immediately, upon inſpection, diſcovered the cauſe of the diſorder; and as women have always a right to the greateſt delicacy and ſecrecy of a phyſician, without aſking her any queſtions, I ordered her to keep her throat warm, and promiſed to ſend her ſome medicine which would relieve her in a few days; and it was afterwards, under another form and pretence, ordered to be continued for a few weeks longer, till I thought her perfectly ſafe.

Laſt ſummer, I was conſulted at Paris, by a young gentleman of about 28 years of age, about a ſore throat for which he had taken advice and medicines already, for the ſpace of three weeks, without any relief. I told him, that, from the very appearance of his face and eyes, I ſuſpected quite a different cauſe of his diſorder than he and his attendants had hitherto imagined; which indeed was moſt evidently confirmed by a large venereal ulcer, which upon inſpection I found ſeated very low down behind the velum. He then gave me the following account. That he had been affected with a violent gonorrhœa two years ago when he was at Venice, which for a particular reaſon he had wiſhed to be removed or ſtopped as ſoon as poſſible; that, for this purpoſe, he was recommended by a friend of his, to a ſurgeon who was in poſſeſſion of an injection which had that infallible effect. That this ſurgeon complied with his deſire, tho' with reluctance; and foretold him, that ſome time after being cured thus haſtily by his injection, the venereal diſeaſe would break out in ſome other

other part of the body; assuring him that he had seen the same effect from the same remedy, happen in several other patients who applied to him in the same manner he did. That he neglected this caution; that the running was perfectly stopped in 48 hours; and that he had never thought more about it, having been perfectly free from venereal as well as any other disorder ever since. This case was to me a very instructive one. First, it shows how long the venereal poison lies sometimes concealed in the mass, without producing any sensible effects: And secondly, it evidently confirms what I have asserted above, that the poison of the gonorrhœa is the very same with that of the syphilis; and that, if absorbed into the mass, it produces therefore the same effects. But lastly, it also shows, which I could not have expected *à priori*, that a recent venereal gonorrhœa may sometimes be stopped or repelled, without producing swelled testicles, ischury, strictures, or other immediate effects in the mass.

Venereal ulcers of the throat require sometimes besides a course of mercury, likewise topical applications; such as an injection or gargle made of a solution of sublimate, mixed according to circumstances with the tincture of mastich, &c.—But if the ulcers are owing to the acrimony of the saliva, they ought to be kept constantly clean, and mercury should be discontinued. If they owe their origin neither to the one nor to the other of the causes just mentioned, but are of that peculiar nature described above under the head of *Venereal Ulcers*, they require, instead of mercury, the use

of

of powerful tonic medicines externally as well internally.

IV. On Venereal Complaints of the Skin.

Cutaneous diſorders of a venereal nature, ſuch as venereal tetters, venereal ſcald-head, venereal leproſy, &c. are often very obſtinate. It is in theſe complaints properly, where the ſolution of ſublimate, given internally, proves often excellent; and I think I have obſerved, that it often effectually removes the diſeaſe of the ſkin, without removing radically the lues: This at leaſt I aſſert with regard to colder climates; as to warmer climates, I know certainly many patients who have been radically cured of the ſyphilis by the ſublimate alone.

Beſides the internal uſe of the ſublimate, warm baths made with a decoction of bran, in every gallon of which half a drachm of ſublimate is to be diſſolved, gently rubbing at the ſame time the affected part, have ſometimes proved to me very uſeful. For more confirmed venereal complaints of the ſkin, the topical application of a ſolution of ſublimate, the citrine ointment ſometimes alone and ſometimes with the addition of the ſaturnine, have ſucceeded with me in a herpes, tinea, &c. where all other remedies proved ineffectual. The decoctum Luſitanicum, the decoction of the ſtipites dulcamaræ, of the mezereum root and eſpecially that of the lobelia ſyphilitica, deſerve, for theſe as well as other obſtinate and inveterate venereal complaints, in my opinion,

nion, a much greater attention than is uſually paid to them. I have ſeen a moſt obſtinate and inveterate diſeaſe of the ſkin of a venereal nature cured by a ſolution of turpeth mineral in ſmall doſes, where all other remedies failed. Some phyſicians pretend to have ſeen great ſucceſs alſo from arſenic; but I never tried this latter, nor have I ever a mind to try it.

V. On Venereal Excrescences.

Venereal excreſcences on the ſurface of the ſkin, known by the different names *condylomata, ficus, mariſca, warts, tubercles*, &c. ariſe either from an original infection, in which caſe we conſider them as a local diſeaſe, and preſcribe local remedies; or they originate from a tainted maſs, which indeed is more frequently the caſe, and then a full mercurial courſe will make them diſappear, ſometimes without any external application. But frequently external remedies are likewiſe requiſite. Cauſtics have been recommended for that purpoſe: but I never ſaw them produce any ſalutary effects; on the contrary, often very bad ones. Exciſion has been likewiſe recommended, and is ſometimes neceſſary; but I have ſeen ſeveral inſtances when, after theſe excreſcences had been cut out repeatedly, even after a full courſe of mercurials, they grew again and again, ſometimes to a larger ſize than they were at firſt. To prevent this regeneration, ſeveral remedies have been propoſed, of which, in all obſtinate caſes

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that have come under my obſervation, I have obſerved but two or three which were adminiſtered with ſucceſs, after the maſs had been previouſly perfectly purified. The one conſiſts in mercurial fumigations; the other in the application of the powder of the *juniperus ſabina*, L. either by itſelf in the form of a powder, or mixed with red precipitate in the form of an ointment. A liquor has been lately propoſed by my friend Mr Plenck, which conſiſts of ſpirits of wine and vinegar each an ounce and a half, corroſive ſublimate one drachm, alum, camphire, and ceruſſa, each half a drachm, under the name of *Aqua cauſtica pro condylomatibus*, and from which, applied twice a-day with a hair-pencil, he affirms to have ſeen the beſt effect. I have tried it ſeveral times, and found it anſwer extremely well. In caſes where a great number of ſmall warts had ſprung up about the genitals, the ſolution of ſublimate in ſimple water or lime-water I have obſerved ſometimes to ſucceed perfectly well. If warts have a ſmall baſis, and are but few in number, the beſt remedy is a ligature made tighter every day. I have ſeen a man with ſeveral hundred little warts upon that part of the chin where the beard grows, and underſtood his diſeaſe to be owing to an ill-treated venereal complaint.

VI.

VI. On Venereal Weakness, or Impotency.

This complaint, though not dangerous, is very alarming, and renders the mind of the patient extremely uneasy. I have repeatedly obſerved it; but in a particular manner in one patient, who ſeveral months before he had been affected with a violent clap; of which at laſt he was cured, after having undergone a tedious and very improper treatment. The only remaining ſymptom was now a total inability and want of deſire of venery, which rendered him extremely low-ſpirited. On conſulting me, I judged the complaint to proceed from the venereal poiſon lurking in the body, and preſcribed him a mercurial courſe, and afterwards ſome tonic medicines, with two tea-ſpoonfuls of Hoffman's anodyne liquor morning and evening. He was likewiſe ordered to waſh the ſcrotum and ſpermatic cord twice a-day, with a table-ſpoonful of the ſame liquor mixed with ſome water: in three weeks time he had ſufficient reaſon to be as high-ſpirited as ever.

VII. On Venereal Pains, Spasms, &c.

Fixed or wandering pains ariſing in different parts of the body, are generally aſcribed, by all patients who were formerly affected with the lues, to the remains of the venereal poiſon in the maſs.

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This is indeed ſometimes the caſe; but it ought to be obſerved, that thoſe pains, ſo generally aſcribed to the venereal poiſon, are very often owing to very different cauſes, which, if not properly diſtinguiſhed, we ſhall find ourſelves frequently diſappointed in the effects of the remedies preſcribed.

Pains ſimilar to venereal ones are often the effects of the improper uſe of mercury. Theſe caſes ought to be carefully diſtinguiſhed in practice; becauſe, if the venereal diſeaſe has not been radically cured, and the pains ariſe from a half-cured lues, the uſe of mercury will be neceſſary to complete the cure (though the patients will often be of a contrary opinion, conſidering the length of time, and quantity of mercury they have already taken); whereas, if the venereal virus has been radically cured, the uſe of mercury will prove evidently hurtful. I know patients who, having made uſe of mercury repeatedly in their younger days for ſeveral venereal complaints, find themſelves now, whenever they take the leaſt quantity of mercury, conſtantly affected with the moſt violent rheumatic pains in different parts of the body. Authors who have mentioned this latter diſeaſe generally aſcribe it to the mercury lodged in the bones; nay, there are even examples recorded in medical hiſtory, where mercury had been found, after the death of ſuch patients, collected in globules in different parts of the body, eſpecially in the bones and their cavities. Whatever credit may be given or denied to thoſe aſſertions, it is certain that we may generally,

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and ſometimes pretty eaſily, cure thoſe patients by a proper regimen, warm baths with frictions, and by adminiſtering to them at the ſame time, internally large doſes of proper tonic medicines either alone or united with antimonials. But if thoſe pains, inſtead of being of the chronic kind, ariſe from a ſudden check of perſpiration during a mercurial courſe, the uſe of tonic medicines would be improper; in ſeveral deſperate caſes of this kind, where the body ſeemed as if it was affected with a general ſpaſm or tetanus, I have found, beſides the warm bath, eſpecially the vapour-bath, the ſulphur of antimony, united with the inſpiſſated juice of the *conium maculatum*, L. known under the name of extract of hemlock, a moſt efficacious remedy, given to the quantity of fifteen grains of each a-day.—Dover's powder, with a proper regimen, proves ſometimes in this caſe, as well as in rheumatiſm, a very ſerviceable medicine.

VIII. *On Venereal Complaints of the* BONES.

THE bones are ſeldom affected by the venereal poiſon, but in a confirmed or neglected lues. I have ſeen, however, one inſtance where the patient being affected with a ſhancre of the glans was attacked the fifth day after with a conſiderable ſwelling in the lower part of the ulna.—In theſe caſes, the longer the diſeaſe is neglected, the more difficult and tedious is the cure; and of all others the

the caries, or ulceration of the external ſurface, and corruption of the internal cavity, are the moſt diſagreeable and tedious.

In all caſes of ulcerated bones we ought to remember, that they cannot be cured until the poiſon is totally eradicated from the maſs. Topical applications ſeem to have very little effect: though the eſſential oil of ſaſſafras has been recommended by ſome; and Plenck recommends a lotion compounded of eſſentia maſtichina, corroſive ſublimate, and honey of roſes. Beſides this, he directs the internal uſe of the Peruvian bark, and mercury mixed with aſafœtida, together with a decoction of ſarſaparilla, united with mezereum and cicuta: by theſe, he ſays, that he cured ſeveral perſons of the diſorders juſt mentioned.

Venereal exoſtoſes, and eſpecially thoſe in the middle of the tibia, ſternum, and tophuſes in the bones of the head, will ſometimes, eſpecially at night, give the moſt excruciating pain. In theſe caſes, I have obſerved no good effect from any topical application whatever. Here large and continued doſes of opium, along with ſome of the ſaline mercurial preparations, are ſometimes attended with the moſt ſalutary conſequences; but what has been lately aſſerted of curing theſe, and other obſtinate venereal complaints, by the uſe of opium alone, I leave to the more credulous to believe.

Of the extraordinary fragility of the bones mentioned by ſome writers as proceeding from a venereal

venereal cauſe, I have never ſeen any inſtance; though it may not be improper to mention one caſe which, I think, may be referred to this head: A man broke his tibia by a fall; but after the beſt treatment of the fracture, and being for twelve weeks confined, upon examination no callus was formed, and the broken bone remained nearly as looſe as at firſt. After a cloſe inquiry and conſultation, the venereal poiſon was ſuſpected, and a courſe of mercury preſcribed; which ſucceeded ſo well, that in a few months after the patient was perfectly cured.

CHAP. XVII.

On VENEREAL COMPLAINTS *disguised, such as Consumption, Rheumatism, Fevers, &c.*

SOME persons who have been formerly affected with venereal complaints, of which they have been apparently cured several months, nay sometimes several years, afterwards grow emaciated, begin to cough, and are affected with hectic fever, and other symptoms which accompany a consumption of the lungs, or a phthysis pulmonalis. These complaints are generally ascribed to some other causes, and medicines ordered for the most part without any success. Sometimes the disorder is also ascribed to the too previous use of mercury in too large quantities. But I have seen several instances where a hectic fever with cough, and sometimes even with a puriform expectoration, far from owing its origin to an ulceration of the lungs, arose from a latent venereal poison, without any other venereal symptom in the body. The same has been observed by others. Mr Brambilla, first surgeon of the present Emperor of Germany, in his treatise on the Phlegmon, relates a case, which shows such a striking instance of the kind, that I shall transcribe it here. An electuary, he says, was prescribed for a consumptive man, who was in a desperate situation. By a mistake of the apothecary, the electuary was given to a venereal patient to rub himself with, and the mercurial ointment, instead of the electuary, was sent to the consumptive patient

tient to take it internally. The consumptive man, knowing nothing of the mistake, took a quantity of the ointment, about the bigness of a nutmeg, two or three times a-day, and was effectually cured of his disorder, to the no small surprise of his physician, who learned by chance from the apothecary the mistake that had happened. This mistake was certainly a very happy one for the patient; and, though it might be doubted whether the consumption proceeded from a venereal cause, it proves however evidently that it yielded perfectly to mercury. I had several patients of this kind whom I perfectly cured of their consumption, by administering to them nothing but a course of mercury.

Agues, or intermittent fevers, have also been observed by Dr Wherlof and others, either to be produced by the venereal virus, or concomitant with the venereal disease; and mercury, combined with the bark, has been found useful in those cases. Perhaps some of the fevers cured by Dr Lyson, with calomel, have been of that kind.

Flying *rheumatic pains*, violent *head-achs*, and *pain in the hip*, sometimes originate from this source. The warm bath, with some saline preparations of mercury, with the decoction of the stipites dulcamaræ, I have seen cure disorders of this kind, which resisted every other medicine. Mercury, with the decoction of daphne mezereum, or of daphne laureola, L. has also been recommended as a very efficacious medicine for those complaints.

CHAP. XVIII.

On VENEREAL COMPLAINTS *incurable by* MERCURY.

I HAVE already ſpoken ſo fully concerning the nature and cure of theſe complaints under the different heads of *Venereal Ulcers, Exulcerated Buboes, Venereal Sore Throat, Diſeaſes of the Skin, Venereal Pains,* &c. that very little remains to be added here.

I muſt only obſerve, that I have found moſt, if not all, of theſe complaints admit of great relief, or even of a radical cure; and that the great point for accompliſhing this deſirable end, lies leſs in theſe complaints themſelves, than in an exact knowledge of their nature. This certainly is ſometimes a much nicer point of practical knowledge than is generally imagined. The great object is, to diſtinguiſh exactly whether thoſe ulcers, caries, cutaneous eruptions, or pains, &c. owe their origin to a latent venereal poiſon, or whether they are the effects of mercury; or, what is perhaps of the greateſt conſequence, whether from having been originally owing to the venereal virus, they now, by time or other circumſtances with which we are not yet ſufficiently acquainted, have changed their nature. In which caſe, inſtead of yielding to the power of mercury, they

they ſeem to be not only in every degree exacerbated by that remedy; but likewiſe, if its uſe be imprudently inſiſted on, will at laſt prove fatal to the patient. In proof of this, I have adduced, under the above-mentioned heads, ſeveral ſtriking, and, as I think, convincing inſtances. And thoſe of my readers who are particularly intereſted in this ſubject may find a good many more in Mr Fabre's Supplement to his Treatiſe on the Venereal Diſeaſe, printed at Paris. I now proceed to the conſideration of thoſe medicines which I have hitherto found moſt efficacious in removing theſe dreadful and obſtinate complaints.

To diſtinguiſh complaints ariſing from mercury, great judgment is often required. I have ſeen patients who complained of rheumatic pains, pains of the bones, headachs, ſpaſms in different parts, and trembling of the extremities, &c. owing, as they thought, to the enormous quantity of mercury they had taken; whom, however, I have cured, after a careful inquiry, by giving them more mercury; becauſe I was convinced that their preſent complaints originated from the improper adminiſtration of mercury, either in quality or quantity, or in the method of the adminiſtration itſelf, where it was evacuated from the body by ſtool, ſalivation, or immoderate ſweats, as faſt as it was adminiſtered; and thereby, though taken for a great length of time, and in a large quantity, could never exert its proper effect upon the poiſon lodged in the body. As ſoon, therefore, as we are aſſured that the diſeaſe is not owing to the venereal virus, or at leaſt will

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not yield to mercury, other medicines ought to be adminiſtered. Inſtead of following the general routine of practice, to give new mercurial preparations, after two or more of them have been already tried in vain, we ſhould preſcribe to our patients, as I have recommended before in ſeveral places (beſides a nouriſhing diet, country air, &c.) tonics or ſtrengthening medicines. Under this claſs I principally reckon antimonials, and, more eſpecially in the caſes alluded to, chalybeates. But, when ſpeaking of the uſe of thoſe medicines, I would not be underſtood to preſcribe them only in the quantity of a few grains a-day, but in much larger doſes than they are uſually given. The preparations I generally make uſe of are the crude antimony, or the ſulphur of antimony; the æthiops martialis, or the vinum chalybeatum, and more eſpecially a combination of iron with vitriolic ether. Of theſe I adminiſter ſuch doſes as the conſtitution of the patient will bear, either alone, or united, according to circumſtances, with the decoction of ſarſaparilla, the Peruvian bark, or the extract of walnuts. The ſulphur of antimony, united with the extract of hemlock, will be ſometimes very ſerviceable, alone or with the uſe of warm baths, and a decoction of ſarſaparilla with the mezereum root. Sometimes the cold bath, and eſpecially bathing in the ſea, will greatly contribute to the effect of the above medicines; and if the diſeaſe be obſtinate, we ſhould more carefully enquire into its nature, and conſider well what has been ſaid above, chapter xiv.

From the decoctum Luſitanicum I have ſeen, in ſeveral

ſeveral inſtances, evidently good effects. But of all the remedies hitherto recommended for venereal complaints incurable by mercury, I have ſeen none equal in its effects to a decoction made uſe of by Dr Paullini. With this decoction, the moſt malignant and obſtinate ulcers, cutaneous diſorders, tophus, caries, pains of the bones and other parts of the body, which reſiſted the power of all other medicines preſcribed by different phyſicians in different climates, have been effectually cured, and, what is ſtill more remarkable, for the moſt part, in a very ſhort ſpace of time. But it is much to be regretted that this remedy cannot become of general uſe, becauſe nobody could hitherto ever prevail upon the Doctor to make it public.

CHAP.

CHAP. XIX.

OBSERVATIONS *on ſome dangerous or unhappy prejudices generally prevailing about the* VENEREAL DISEASE.

IT is an opinion imbibed by ſome patients, that the venereal poiſon, when once abſorbed into the ſyſtem, can by no means be totally eradicated; conſequently they believe, that a perſon who is once thoroughly infected, can never look upon himſelf as radically cured. This opinion, beſides its abſurdity, renders thoſe who entertain it very unhappy. I have ſeen frequent inſtances, in the female ſex eſpecially, where ſuch patients led a moſt miſerable and melancholy life, notwithſtanding every thing the phyſician could ſay to the contrary. The leaſt ſhadow of a head-ach, a rheumatic pain, or the ſmalleſt pimple upon the ſkin, were by ſuch perſons accounted certain proofs of the poiſon lurking in the maſs, and about to produce the moſt direful effects. Theſe patients are real objects of compaſſion: we ought to beſtow ſome time for inquiry, and pay the moſt careful attention towards them; for indeed we can hardly think of a greater degree of miſery than to be perpetually haunted with ſuch an imagination. If, therefore, after our moſt careful inquiry, we find no ſymptoms of a venereal kind remaining, we ſhould endeavour to correct their prejudice, by ſetting before them the example

amples of others of their acquaintance, or, if circumſtances admit, of thoſe of our own, who have been affected as much as themſelves, or perhaps much more, and who now, perhaps, after a great number of years, enjoy the moſt perfect ſtate of health, are married, and have healthy and fine children.

The ſame attention we ought to pay to thoſe who imagine, that if mercury is once taken for the cure of the lues, it will not ſo effectually cure it a ſecond time. Theſe prejudices are moſt frequently found among the women, though ſometimes alſo men of a melancholic conſtitution will be influenced by them: but there is another prejudice of which I am now to ſpeak, which is not only abſurd, but criminal, and deſerves a moſt ſevere puniſhment from the magiſtrate wherever it can be proved. It exiſts only among ſome young men of a looſe character, and diſſolute and brutal manner of thinking. With theſe wretches it is an opinion, that the beſt method to get rid of a clap is coition with one or more healthy women; and in this manner I have ſeen venereal complaints propagated, in the courſe of a few days, to ten or twelve healthy perſons, who had the misfortune to fall in with thoſe wretches, or with the objects of their brutality and cruelty. The abſurdity of this notion is evident to every perſon of common ſenſe, who has the leaſt knowledge of the nature and ſeat of the diſeaſe; and where this practice ariſes merely from prejudice, the ſlighteſt information will be ſufficient to remove it. But it is to be feared,

that the cauſe may frequently lie deeper in the heart of theſe perſons; and that this abominable practice proceeds from malignity, or from a mean and low diſpoſition to revenge themſelves upon innocent perſons, becauſe in their imprudence or drunkenneſs they themſelves had become the dupes of others.

FINIS.